

NEWSrounds

Great Leapfrog Forward — RUSH RANKED AMONG COUNTRY'S TOP HOSPITALS

Rush's goal is to be among the very best medical centers in the country — and the results of a comprehensive hospital survey show that we're on our way toward achieving that high standard. Rush recently was named among the top hospitals in the country for safety, quality and resource use by the Leapfrog Group, a national organization that promotes health care safety and quality improvement.

Rush is one of only 45 hospitals that made Leapfrog's top hospitals list for 2009 out of 1,206 hospitals surveyed, and Rush was one of only three Illinois hospitals to be so honored. The top hospitals were announced in December.

"These results demonstrate that Rush is dedicated to the highest standards of quality and patient safety and makes them the focus of everything

we do," says Larry Goodman, MD, Rush president and CEO.

The Leapfrog Hospital Recognition Program measures and evaluates hospital performance to recognize achievements and encourage improvements in the efficiency of hospital care. The program's latest rankings drew on information gathered through the 2009 Leapfrog Hospital Survey, which compiled data reported by 1,206 hospitals in 41 states. The survey is the only national, public comparison of hospitals on key issues, including mortality rates for certain common procedures, infection rates, safety practices and measures of efficiency.

To be designated a Leapfrog top hospital this year, city hospitals needed to fulfill the following criteria:

- Fully meet Leapfrog standards for implementing computer physician order

entry systems, which have been shown to reduce medication errors by up to 85 percent, and for passing Leapfrog's test of their system

- Fully meet stringent performance standards for complex, high-risk procedures, such as heart bypass surgery
- Meet standards for staffing the intensive care unit with doctors and nurses specifically trained in critical care, which have been shown to reduce mortality by 40 percent or more
- Score in the top 10 percent in the country for efficiency. The Leapfrog Hospital Recognition Program measured efficiency in terms of quality outcomes, length of stay, readmission rates, and incidence of hospital-acquired conditions and infections. The efficiency standard applies to heart bypass surgery, heart angioplasty,



Nichole Banks, BSN, RN, (left) and Colleen McGuire, BSN, RN, (right), staff nurses in adult critical care, 8 North Atrium, work together to help a patient.

heart attack and pneumonia patients. Efficiency was a new category this year, an addition that reflects the growing concern about the cost of health care.

"It's a great testament to the very skilled and dedicated staff

at Rush that Leapfrog has found we're providing excellent care for our patients, and doing it in a cost-effective way," Goodman says. "I thank and congratulate everyone at the Medical Center for their part in this achievement."

TRANSFORMATION MILESTONE: RUSH TOPS OFF THE NEW HOSPITAL



Vanessa R. Badgett, who works in finance, signs the final steel beam.

The Medical Center celebrated an historic milestone in the Rush Transformation in December when the final steel beam used in the construction of the East Tower was raised. Beforehand, employees had the opportunity to sign the 25-foot beam, leaving their mark on the 14-story new hospital building currently under construction at the corner of Harrison Street and Ashland Avenue. The East Tower will be completed in 2012.

Mick Zdeblick, vice president, campus transformation, was one of many on hand to help celebrate. "This achievement puts us one step closer to achieving our goal of making Rush the medical center of choice," Zdeblick explains. "It's symbolic of our vision in providing the best possible care to our patients in the city and from around the country."

Learn more about Rush's Transformation and how its trials and mock-ups of rooms and equipment have helped shape the project's development over the last few years. Read the story on page 3. To learn more about the Rush Transformation, please visit www.rush.edu/transformation.

NEW YEAR, NEW LOOK!

As you can see, *NewsRounds* has undergone some changes. Starting with this issue, the newsletter will be in full color and a larger size. We've made these changes, in response to feedback from our readers, in order to make *NewsRounds* an even better source of information about what's happening at Rush. Best of all, this new look doesn't affect the cost of production.

We hope you'll enjoy the revamped *NewsRounds* and that you'll take the time to read about the exciting developments and interesting people at the Medical Center. Thanks for reading. If you have any questions or comments, please e-mail rush_news@rush.edu or call us at ext. 2-5582.

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NEWSrounds

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Editor
Anne Burgeson

Managing Editors
Elizabeth Higgins and Kevin McKeough

Contributors
Cindee Castronovo, Nancy DiFiore, Judy Germany, Jill Goldberg, Thurston Hatcher, Cari Kornblit, Ken Quandt, Erin Thorne, Juliana Walker and Molly Wolfe

Designer
Kristen Marzejon

Photographers
Steve Gadowski, Leo Garcia and Bill Richert

Have a news item or story idea for *NewsRounds*? Contact the editor at:
Phone: 942-5582
Fax: 563-4149
E-mail: anne_burgeson@rush.edu

Marketing and Communications
Triangle Office Building
1700 W. Van Buren St., Suite 456
Chicago, IL 60612

FREIDENFELDS COMBINES CUSTOMER SERVICE, SECURITY

For Lauris Freidenfelds, safety and customer service go hand in hand. Freidenfelds has been the director of security at Rush since June of 2008, and since his arrival he’s emphasized engagement with Rush visitors as a primary method of keeping Rush secure.

“A good security principle is to get involved and interact with people and help them with whatever issue they have,” he explains. “That approach will create a positive atmosphere for the people who really want assistance and deter people who just want to hide out in the crowd.”

Freidenfelds has spent more than 20 years in the security profession. Before coming to Rush, he consulted for a variety of clients, including numerous academic medical centers. At Rush, he supervises a staff of 64 people, including 56 full-time security officers.

He was drawn to the job by the opportunity to put into practice the concepts he’d been advocating as a consultant. “As a consultant I made recommendations, but I didn’t get to act on them. This position was a great opportunity to both make the recommendation and take on the challenge of implementing them,” he says.

NewsRounds spoke with Freidenfelds about the state of campus security — and how helping patients and visitors also helps keep Rush safe.

NewsRounds: From your perspective, how safe is Rush’s campus?

Freidenfelds: We’re in a very safe environment here. The immediate campus, from Polk Street to Jackson Boulevard, Wood Street to Ashland Avenue, is a very safe area. Very, very little happens here.

When you get outside our campus, when you start to get toward the south and west, that’s where issues of crime are more prevalent. A lot of our work force comes in from around those areas. We can’t escort people home, so I need to educate people about what they need to do when they get on the train or take a bus. (See Freidenfelds’ tips in the box to the right.)

NewsRounds: What changes have you made to campus security since you arrived?

Freidenfelds: When I got here, we were using a style of security that focused on responding to problems. I prefer to focus on a more proactive customer service approach. By helping people, you can determine if someone really belongs here. I’ve also shifted the focus from driving around the hospital, street patrol, to giving security officers responsibility for buildings and a sense of ownership of their area.

NewsRounds: What kind of security issues do you face most often?

Freidenfelds: Nursing and hospital staff are the No. 1 victims of workplace violence. Probably not a week goes by that we don’t have three or four calls about patients who become agitated, especially psychiatric patients, or visitors who become distraught and act out, such as loved ones dealing with a loss in a potentially harmful manner.



Lauris Freidenfelds and Eric Turner, a Rush security officer, speak with a visitor at the Medical Center.

We want to be very sensitive in dealing with these situations, especially when patients are involved. The security officers have a complex situation. They’re dealing with scenarios that require thinking quickly on their feet to resolve problems.

NewsRounds: How are the officers trained?

Freidenfelds: The International Association of Hospital Safety and Security provides officers with training. We also go through training with the psychiatry department about how to address situations, and we do monthly in-service training.

NewsRounds: The Rush campus includes a lot of public buildings. What are some of the challenges involved in maintaining security in them?

Freidenfelds: Hospitals are required to be able to lock down in an emergency. We don’t have electronic ways of closing doors. We have a lot of front, back and side doors, and we don’t know if they’re secure or not without sending a security officer to check them. I’m working on obtaining grants and capital money to find a more effective means to lock down the hospital in an emergency, so that we can press a button and lock down automatically.

We’ve also developed a limited access procedure to respond to a severe pandemic situation due to something like the H1N1 [swine flu] virus. As you know, recently we raised the level of security in response to the rate of flu infection, and we screened visitors at entryways for flu virus.

NewsRounds: You mentioned customer service earlier. What kind of services do the security officers provide?

Freidenfelds: Our primary service is escorting patients, visitors and employees — giving them a ride, walking them to their cars when it’s dark, accompanying them when they’re carrying valuables. We also assist with wayfinding.

Customer service also can be as simple as asking someone who’s standing in a lobby who they’re waiting for or if we can call someone for them. It’s a good way to learn the reason people are here and to prevent people who aren’t supposed to be here from doing something.

We’re progressing in the right direction by becoming visible on the floors. We used to walk the floor once a day; now it’s twice a shift. The main thing is combining helping with protecting.

To contact Lauris Freidenfelds for more information about campus security, call ext. 2-6395 or e-mail lauris_freidenfelds@rush.edu.

SAFETY TIPS ON CAMPUS

Lauris Freidenfelds recommends that Rush personnel take the following precautions to increase their personal safety when traveling to and from the Rush campus:

- Stay in a well-lit area
- Travel in groups
- Be aware of your surroundings and the people in the area when traveling to and from campus
- Keep your valuables out of sight
- Keep your cell phone in your pocket
- Keep your laptop computer hidden and protected in a bag
- Stay off your cell phone and avoid looking at or being distracted by your iPod or similar devices

CORRECTIONS

In the December issue of *NewsRounds*, we used the wrong photo for Regina Chen in People News.

An article about research at Rush in the October, 2009 issue of *NewsRounds* identified Molly Martin, MD, as an assistant professor of pediatrics and preventive medicine. While Martin holds appointments in both the Department of Preventive Medicine and the Department of Pediatrics, her research is conducted solely in the Department of Preventive Medicine.

NewsRounds regrets the errors.



Regina Chen

TEST DRIVING MATERIALS IN THE NEW EAST TOWER

If you’ve ever bought a car, you know the value of first doing research, taking cars for test drives and kicking the tires. Much like that process, Rush has done quite a few “test drives” by seeking input from staff, patients and visitors on many aspects of the East Tower. We’ve done this in two key ways: with mock-ups — scale or full-sized models of a design or device — and trials — testing a product to determine if it is the best choice for our needs. These have helped guide key decisions about everything from what type of chairs visitors will sit on in our lobbies to what materials will be used to build the East Tower’s exterior walls.

“Mock-ups help in the decision-making process, because people respond much better to a full-sized, three-dimensional design than to a drawing,” says Joe DeVoss, assistant vice president, Office of Transformation (OOT). “They actually expedite the decision process, which protects the overall design and construction schedule.”

Since even before transformation construction began in 2007, OOT has conducted numerous mock-ups that have provided valuable input and resulted in changes to

the initial design. The acute care and critical care patient room mock-ups are a good example. The rooms were toured by a wide range of groups, including clinicians, patients, housekeeping, maintenance, risk management, infection control, food and nutrition, and security. In addition, the nursing alumni association and philanthropy department ran open houses. As the OOT team gathered feedback from each of these groups, they modified the mock-ups, changing everything from room sizes and window placement to the location of furniture and outlets. Now, as the interior construction starts to take shape in the East Tower, the team will take what it learned from these mock-ups and complete an acute care and a critical care patient room in the new hospital building to ensure that all of the approved recommendations have been satisfied before construction of the rest of these rooms.

“Trials are also useful tools,” adds DeVoss. “They help us to understand the appropriate use of a new product and judge the ease of its maintenance and the general wear and tear it can withstand. The longer the trial, the more information we can gather.”



Visitors to the East Tower will have an easier time finding their way to public elevators thanks to the “green” wall that will be the trademark feature of the lobbies outside these elevators.

Some of the trials have tested carpeting, flooring, lighting, furniture and wall finishes. While most of the trials have been completed, some of the tested materials will remain in the Atrium Building until the East Tower opens and renovation of the Atrium and Kellogg buildings begin. In some instances, the products tested have proven to be the right choice, such as the patient lobby furniture and environmentally friendly plumbing fixtures. However, there also have been some unexpected outcomes. After many staff voiced objections about carpeting corridors in patient units in the

East Tower, a six-month trial of carpeting in corridors proved that commercial carpeting is superior in cleaning and functionality and helps to reduce noise.

All of these “test drives” are critical to assure that the Rush Transformation creates an environment with all the features necessary for everyone who works at Rush to do their best — a key goal of the project.

To learn more about the Rush Transformation, please visit www.rush.edu/transformation. For questions, please contact the Office of Transformation at facilities_questions@rush.edu.

RUSH UNIVERSITY COURSE AIDS STUDENTS IN COLLABORATION

For the first time in Rush University’s history, all students in the College of Health Sciences, Rush Medical College and the Rush University College of Nursing are now taking an interdisciplinary course, entitled “Health Care in America.” The course introduces students to the complexity of the U.S. health care system, including its historical development, as well as the organization and delivery of health sciences; the economics and financing of health care; the nation’s health care workforce; access to and quality of health services; health policy and the public’s health; and future directions of the country’s health care system.

While the University has offered the interdisciplinary course for the last 14 years, it wasn’t until last fall that medical students were enrolled in it. In all, the course enrolls 247 students from the three colleges. “It brings students from various health care disciplines together to enhance their understanding of the health care team concept and develops their communication skills across disciplines,” says Diane Howard, PhD, assistant professor, health systems management.

Howard is the course co-director along with Keith Boyd, MD, associate dean for curriculum, Rush Medical College. Boyd says the course gives students an appreciation of the role of other health care professionals. “The students come to realize the importance of being introduced to other disciplines to better understand what the discipline is; the type of professionals who gravitate to various disciplines; and how they will need to work with these disciplines once they enter the workforce,” he explains. “It also breaks down communication barriers and serves as a springboard

to what faculty expect will be long-term professional relationships.”

“Health Care in America” is very project focused. In the fall quarter of 2009, there were 30 team projects, with eight to nine students assigned to each project. Topics focused on patient safety, quality management/process improvement and contemporary issues in medicine. In one project, students had to analyze a real event that jeopardized patient safety at Rush and make recommendations about how to prevent such an event.

Rush College of Nursing to Develop Much-Needed Curriculum for LGBT and HIV Positive Adults

In other University news, the Howard Brown Health Center in Chicago has partnered with Rush University College of Nursing to develop a first-of-its-kind cultural competency curriculum for the care of lesbian, gay, bisexual or transgender (LGBT) and/or HIV positive older adults. Marilyn Wideman, DNP, RN-BC, assistant professor, director of faculty practice and outreach, College of Nursing, and Angela Moss, ANP, MS, RN, assistant professor, College of Nursing, will collaborate with their colleagues from the Howard Brown Health Center to develop a comprehensive program to provide education and training in geriatric care for LGBT and HIV positive individuals. The curriculum will begin later this year and will train up to 280 nursing professionals and nursing students annually. Based in Chicago’s Uptown neighborhood, Howard Brown Health Center is one of the nation’s largest LGBT health care organizations.

For more University news, please go to the Rush University Web site at <http://www.rushu.rush.edu>.

Thank You from the Adopt-A-Family Program and the Rush United Way Committee

While the holidays are over, the giving spirit of the season continues to benefit families and charitable organizations throughout the Chicago area, thanks to Rush’s Adopt-a-Family Program and the Medical Center community’s support of the United Way.

The Department of Community Affairs would like to thank everyone who participated in the 2009 Adopt-A-Family Program. This year, 123 families were adopted and received food, clothing, housewares and children’s toys — all purchased by Rush employees, medical staff, students and friends. This support and generosity helped make the holiday season a time of celebration for these families in need. To learn more about the Adopt-A-Family Program, contact Verneice Cherry at ext. 2-5961.

Thank You From United Way

Rush has collaborated with the United Way of Metropolitan Chicago for many years to help support charities that work with people in our community. Employees at Rush always have been very generous and supportive of the United Way, and during this year’s campaign, more than 34 percent of all employees contributed, raising approximately \$217,000. Thank you again for another successful United Way Campaign. Your donations will be extremely beneficial in helping to improve the lives of community members throughout the Chicago area. For information about the United Way of Metropolitan Chicago, please visit www.uw-mc.org. If you’d like to share your United Way volunteering story, send an e-mail to united_way@rush.edu. If you have any other questions, please contact Lauren Goebel at ext. 3-3280.

Kateri Evans (left), RN, BSN, nurse clinical coordinator for the Coleman Foundation Comprehensive Clinic for Gastrointestinal Cancers; and Carol Hallinan (right), RN, senior clinical review coordinator, oncology administration, drop off gifts for the Adopt-A-Family Program.



A Lifetime of Healing

JANET WOLTER, MD, RETIRES AFTER 46 YEARS AT RUSH



When Janet Wolter, MD, first began practicing medicine, the polio vaccine hadn't yet been discovered, and cancer was so feared that it wasn't discussed openly.

By the time she retired as Brian Piccolo Chair of Cancer Research and professor of internal medicine at Rush at the end of November 2009, Wolter had provided thousands of cancer patients with hope and made important contributions to the advances that have transformed cancer care and outcomes.

To honor Wolter, Rush is hosting a seminar of former residents and fellows on Feb. 27 and will name a new teaching area after her. The Janet Wolter, MD, Clinical and Educational Conference Room will provide a comfortable, high-tech home for the education of residents and fellows and for collaboration among clinicians of various specialties. The room will be built as part of the renovation of the 10th floor of the Professional Building later this year to house Rush's new outpatient cancer center.

The educational focus of these tributes reflects Wolter's enduring influence on generations of physicians. "She served as a role model, for me and many other oncologists who trained at Rush; for our internal medicine residents and students; and especially for many female physicians," says Philip Bonomi, MD, Alice Pirie Wirtz professor of medical oncology and director of hematology-oncology at Rush, who trained with Wolter as an oncology fellow.

"She's a very fastidious physician who has taken excellent care of patients. There's no one better," Bonomi continues. "On Monday mornings, the oncology team goes through new cases, and to this day her remarks are incredibly insightful and pertinent, not only in breast cancer but other cases."

SEVENTH GRADE PLANS

A native of River Forest, Wolter declared her intention to be a doctor in a seventh grade essay. In the late 1940s, she first came to what would become Rush during a clerkship at Presbyterian Hospital while attending the University of Illinois (U of I) College of Medicine. (Presbyterian eventually merged with both St. Luke's Hospital and Rush Medical College to form what now is Rush University Medical Center.)

World War II had just ended when she was accepted into medical school. "A lot of the guys weren't out of the service yet," Wolter recalls. "In my class of 165, 21 were women, but the next year when everybody came back from the war, it went down to four women and 161 men."

After receiving her medical degree in 1950, Wolter completed training at Johns Hopkins Hospital, Duke University Hospital, the University of Illinois Research and Education Hospital and Presbyterian Hospital before joining the U of I faculty. There, she treated polio patients, who were confined in iron lungs that enabled them to breathe.

"All the equipment back then was big and rigid and heavy," Wolter remembers. "We

had no computers. Electrocardiograms (EKGs) were done on photographic paper, and every floor in a hospital had a dark-room where you'd develop the EKG."

The advent of the polio vaccine in the mid-50s eventually led to the end of her program, and Wolter joined the Presbyterian-St. Luke's Hospital faculty in 1963 to collaborate with pioneering physician Samuel G. Taylor III, MD, in his work treating cancer patients with hormones and chemotherapy. "It wasn't even called oncology. There wasn't even a name for it then," she remembers. "There really wasn't anything that could be called cancer care. If the surgeon couldn't remove the tumor, that was it."

Over the coming decades, the field advanced with the development of chemotherapy and radiation, hormone and targeted therapies. While her early experience included all kinds of cancer, Wolter's primary focus has been breast cancer, an interest that ultimately led to her role in Rush opening the first comprehensive breast center in the Midwest. After remaining largely unchanged from 1930 to 1990, breast cancer death rates decreased by 27 percent from 1990 to 2005, according to the American Cancer Society.

Rush Research IN THE NEWS

Rush University Medical Center's physicians, scientists and researchers are pursuing a new understanding of complex medical questions and new treatments and techniques, all with the aim of ultimately improving care. The following Rush researchers and studies recently have received local and national media attention.

- A new study explores a widely used, cholesterol-lowering drug and how it may prevent the progression of Parkinson disease. The research is led by study author Kalipada Pahan, PhD, professor of neurological sciences.
- Ece Mutlu, MD, gastroenterologist and principal investigator of a study funded by the U.S. Department of Defense, explores the relationship between bacteria in the gastrointestinal tract and how microbial imbalances may impact diseases like breast cancer.
- Caryn Etkin, PhD, study co-investigator and project manager in adult health nursing, along with other researchers in the College of Nursing, have begun a study to evaluate the potential benefits of incorporating a physical activity program into the daily lives of caregivers of Alzheimer's and dementia patients.
- Results from a recent study suggest that adult stem cells from donor bone marrow may help repair muscle cells damaged by heart attack. The study principal investigator is Gary Schaer, MD, director of the Rush Cardiac Catheterization Laboratory. Rush was the only Illinois site and one of 10 cardiac centers across the country that participated in the 53-patient, double-blind, placebo-controlled Phase I trial.
- The National Institutes of Health (NIH) has awarded a consortium of Chicago-based institutions led by Rush a five-year, \$3.75-million grant to establish a developmental center for AIDS research. The center will create a comprehensive research infrastructure to spur basic science, clinical studies and translational research in the prevention, detection and treatment of HIV infection and AIDS. The center in Chicago involves investigators from Rush, the University of Illinois at Chicago (UIC) and Cook County Health and Hospitals System, who will collaborate across disciplines and institutions to advance HIV/AIDS research. Alan Landay, PhD, chairperson of immunology and microbiology at Rush, is the director of the center.



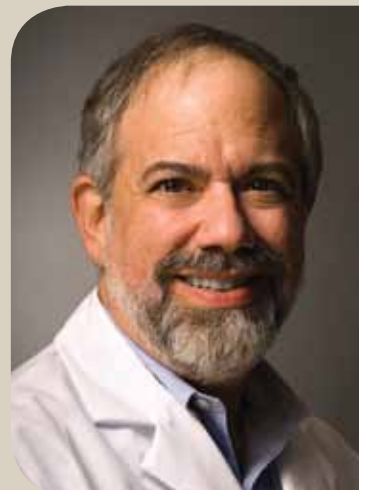
Kalipada Pahan, PhD



Ece Mutlu, MD



Gary Schaer, MD



Alan Landay, PhD

For more information about these studies and the latest news about Rush research, please visit the "Rush In The News" page on the Rush Web site, www.rush.edu. Print articles also are available for viewing on the Rush intranet site located at <http://iris.rush.edu/news>. To access the articles, go to the green bar on the left side of the page and select the link, "Media Clips."

Janet Wolter, MD, (center) when she was chief resident at the University of Illinois Research and Education Hospital in 1954.



MAKING A DIFFERENCE:
COMPREHENSIVE CARE

One of Wolter’s greatest satisfactions is the role she’s played in this progress. She served on the executive committee and board of directors of the National Surgical Adjuvant Breast and Bowel Program, a National Cancer Institute-supported cooperative group of researchers conducting clinical trials of cancer treatments, and she was the principal investigator for the Rush arm of the program from 1989 until January 2010.

“I’ve put hundreds of patients on their clinical trials, which helped us define not only what hormones are going to work and how long we should administer them, but all kinds of combinations of chemotherapy,” Wolter reflects. “These are things that nobody can claim as personal triumphs, but you get a lot of satisfaction from being part of the answer.”

Bonomi credits Wolter with another important innovation in cancer care. “She had the idea of having nurse specialists in oncology working in tandem with oncologists and began training them 35 years ago or more, long before medicine had nurse practitioners,” he says.

In addition, Wolter took the initiative in establishing the Rush Pigmented Lesion

Clinic in the mid-1970s, and she served until her retirement as the clinic’s medical director. The multidisciplinary clinic provides preventive screening for skin cancer and sees about 500 patients a year.

In treating her patients, Wolter combined the pursuit of medical advances with compassionate, personal attention. She routinely gave patients her home phone numbers — “they never abused it, and it meant so much to them” — and maintained an optimistic outlook. “As soon as patients have a little bit of hope, they feel better,” Wolter notes.

“She’s the ultimate doctor: She’s caring, she’s knowledgeable, she has a great sense of humor, and she’s always available,” says Juliana, a Chicagoan in her 40s who has been a patient of Wolter since being diagnosed with cancer in 1989.

Juliana credits Wolter with keeping her alive and for tailoring her ongoing chemotherapy

regimen to reduce its side effects and to give her more time with her husband and three children.

“There are no words to describe what she’s done for me and my family,” Juliana says. “She’s even met with each of my children individually to address their concerns. That’s how she treats all her patients. She makes each person feel special. Having her as a doctor fills you with hope and strength.”

Wolter’s deep dedication to her patients kept her working 50-hour weeks into her 80s. “I love it,” she says “All these people are so interesting, and they’re so grateful for whatever you do for them. It’s the most satisfying thing you can do.”

Even in retirement, Wolter isn’t leaving Rush or medicine behind entirely. She plans to help the oncology research program with regulatory issues, working from her Chicago home. “We’ve told her she can do as much

or as little as she wants, and we hope she will continue to serve as an advisor,” Bonomi says.

“She can’t be replaced, no question about it,” he adds. “But even though she may not be here, the things we’ve learned from her will continue to help us in taking care of patients, doing clinical research and maintaining the highest standard of integrity.”

The Janet Wolter, MD, Seminar and Luncheon will take place on Saturday, Feb. 27 from 8 a.m. to 1 p.m. For more information, contact Lisa Gerberding or send an e-mail to alumni@rush.edu.

Rush is raising funds for the conference room that is being named in Janet Wolter’s honor. To support this initiative, please contact Linda Roche in the Office of Philanthropy (312-942-6112 or linda_roche@rush.edu).

QUESTIONS & ANSWERS ABOUT A HEART-HEALTHY LIFESTYLE

At Rush, keeping people healthy includes helping Rush staff, employees, students and volunteers lead healthy lifestyles. As part of that goal, *NewsRounds* asked Cassie Vanderwall, MS, RD, LD, a registered dietitian at Rush and a certified personal trainer, to offer her heart-healthy tips.

Why is a heart-healthy lifestyle good for everyone?

Good nutrition and exercise significantly reduces your risk — by 50 percent — of heart disease and stroke, which remains the No. 1 killer of Americans. *The Diet and Lifestyle Goals for Cardiovascular Disease Risk Reduction*, published by the American Heart Association, are proven lifestyle changes to promote heart health, which leads to lower total and LDL cholesterol levels, decreased triglycerides, reduced blood pressure and blood glucose control.

What does a heart-healthy meal plan include?

Heart-healthy eating includes everything, in moderation. This style of eating focuses on foods that are lower in sodium, healthier fats and proper portion sizes.

What types of fat should I consume on a daily basis?

Heart-healthy fats are those that are fluid at room temperature, such as olive oil, fish oil, and the oils from nuts and seeds. Fats that are solid at room temperature are called saturated fats, and they are

known to increase LDL cholesterol and promote cardiovascular disease. If saturated fat is bad, than trans fat is worse. Trans fats have been found to both increase “bad” (LDL) cholesterol and decrease “good” (HDL) cholesterol.

What are omega 3 fatty acids?

Omega 3 fatty acids are unsaturated fats that are found in fish oil, flaxseed oil, walnut oil and many other nuts and seeds. This type of fat has been shown to decrease triglycerides, lower blood pressure, decrease the risk of arrhythmias and decrease the growth of arterial plaque. Eating fatty fish — such as mackerel, lake trout, herring, sardines, albacore tuna and salmon — two times per week will meet this recommendation.

Is chocolate really good for my heart?

Yes, three and a half ounces of *dark* chocolate daily is heart healthy! Dark chocolate has 65 percent more cacao flavonoids than milk or white chocolate. Flavonoids provide both the pungent taste and the health benefits, such as decreasing blood pressure and blood cholesterol.

How much salt is too much?

The recommended daily allowance for sodium is 2,300 mg., or one teaspoon of salt. Salt can easily sneak up on you because it is the most common preservative in packaged foods.

Does sugar affect my heart?

Yes. Elevated blood sugar levels and people with diabetes are at an increased risk for heart disease and stroke.

What are some easy ways to include heart-healthy exercise in my daily routine?

Aerobic exercises help to keep our hearts strong. These exercises include walking, jumping rope, jogging, stair climbing, dancing, etc. To include exercise daily, try any of the following activities:

- Count your steps! Use a pedometer and work your way up to 10,000 steps per day.
- Grab a friend or a pet and go for a walk.
- Dance to your favorite music.
- Park farther away from the store, or take public transportation.
- Forget elevators and escalators, and take the stairs.

What other lifestyle changes will benefit my heart and cardiovascular system?

Besides good nutrition and daily exercise, the following changes will help you to achieve a heart-healthy lifestyle:

- If you smoke, stop smoking.
- Drink eight glasses of water per day.
- Relax and find ways to lower your stress level.

If you are interested in learning how to apply these guidelines, or have additional questions, please contact a registered dietitian at (312) 942-DIET (3438) or via e-mail at nutrition@rush.edu.



Employee Awards

3rd QUARTER

Each quarter, Rush employees are recognized for going above and beyond the call of duty for patients, families, visitors and co-workers. These employees are shining examples of the Rush I CARE values (innovation, collaboration, accountability, respect and excellence). The following are the winners of Rush's awards for the third quarter of fiscal year 2009.

EMPLOYEE OF THE QUARTER

Diane Skierkiewicz, administrative assistant, anesthesiology, is a true team player. She went out of her way to help Jonathan Burke, a new administrative assistant in the department, excel in his position. Knowing how stressful it can be to transition into a new job, Skierkiewicz took Burke under her wing. "Diane's experience and time at Rush are invaluable to our department, and her friendly, helpful nature put me at ease from day one," says Burke, who nominated Skierkiewicz for the award. "She is the heart of our department."



MANAGER OF THE QUARTER

Traci Colvin, research study manager in the Rush Alzheimer's Disease Center (RADC), was nominated by her department for her exceptional interpersonal and management skills, hard work and many achievements. Colvin mentors a large staff working on several externally funded studies and is creative in her approach to making sure data is collected. She collaborates with study sites, offering new educational opportunities to keep participants engaged. "Much of our success can be attributed directly to her leadership and character. This departmental nomination for manager of the quarter can only begin to express the appreciation we feel daily for Traci's contribution," says Tracy Faulkner, RADC department manager.



TEAM OF THE QUARTER

Rush is a place for teaching as well as healing. The 7 South Atrium discharge teaching team took the time to teach three members of a family with no medical background how to care for a loved one who needed total dependent care. The group created various teaching tools and provided a great deal of emotional support to the family. The family learned how to make sure the patient's artificial airway was clear while providing nutrition through a feeding tube; how to administer medications; and how to carefully turn, position and bathe their loved one. The team includes the following members: Julie Lopez, DNP, RN, unit director; MaryJo McHugh, RN, senior case manager; Susan Brady, RN, case manager; and 7 South Atrium nursing staff members Julia Anderson, RN, Angela Brunfeldt, RN, Melissa Datu, RN, Amber Engstrom, RN, Ashley Martucci, RN, Betsy Parrino, RN, Megan Smyrniotis, RN, and Liza Villanueva, RN.



The 7 South Atrium discharge teaching team with award presenter Jane Grady, PhD, human resources (center): (Left to right) Megan Smyrniotis, RN; Julie Lopez, RN; Liza Villanueva, RN; Melissa Datu, RN; MaryJo McHugh, RN; and Sue Brady, RN. Not pictured: Julia Anderson, RN; Angela Brunfeldt, RN; Amber Engstrom, RN; Ashley Martucci, RN; and Betsy Parrino, RN.

PATIENT SATISFACTION "STAR"

Every quarter, an employee whose name appears in two or more favorable patient evaluations is awarded the patient satisfaction "star" award. This quarter, five stars were honored: Elizabeth Scott, RN, ambulatory surgery; Joy (Jensen) Warner, RN, New Life Family Center; Maria Hoy, CMA, Rush Head and Neck Associates; Lolita Reynolds, endoscopy technician; and Sabina Kuduzovic, x-ray technician, emergency department. Their patient evaluations included the following comments:

- "My nurse Liz was very helpful. While I was in recovery she consistently asked about my pain level."
- "Joy was an excellent nurse! She took the time to help me breastfeed two nights in a row."
- "Maria was always prompt, courteous and empathetic about what I was going through. She has a keen sense of humor, which put me at ease."
- "Lolita was wonderful. She made me laugh and feel less nervous before surgery. Awesome personality and smile."
- "Sabina was extraordinarily sensitive when taking care of me. She covered me with a warm blanket and was very helpful."

RUSH VALUES AWARD

"Rebecca Fransted from the Special Care Nursery is a true example of nursing excellence," says Rebekah Gaffin, RN, BSN, Supplemental Staffing Office, who was a patient here at Rush last year. "Becky began caring for one of my twin daughters, Elaina, after I delivered prematurely at 29 weeks. When we lost Elaina's twin sister, Eva, she helped my new family cope and recommended various resources available to help us deal with our loss." Fransted reassured Gaffin's family by keeping them constantly informed about their daughter's progress. After spending long hours in the neonatal intensive care unit, Fransted encouraged Gaffin's family to take the time to care for themselves. "Becky would encourage us to get off the unit to eat or rest or just to gather our thoughts and would say 'I'm here and will call you if anything changes.' It was incredibly comforting during this stressful experience knowing that she was there watching our daughter," says Gaffin.



It's not easy living with a complicated, chronic illness. One young girl coped with cystic fibrosis with the help of Lori Yoder, licensed clinical social worker in the Department of Case Management, who also works in the Rush Cystic Fibrosis Center. The young patient and her grandmother, who cared for her, began to have financial difficulty and ended up living in a homeless shelter. Yoder, aware of their circumstances, sought financial help from community organizations and individuals to assist this family in renting an apartment. Yoder also led an effort of collecting donations from community organizations that furnished their new apartment and provided food and clothing. "Lori has taught me that we can make a difference in the lives of those we serve," says nominator Susan Hauptman, technical supervisor, pediatrics pulmonary function testing lab, and respiratory therapist, Rush Cystic Fibrosis Center.



CAROL STEGE AWARD FOR ENVIRONMENTAL SERVICES

Barbara Milner, environmental services technician on 5 North of the Johnston R. Bowman Center, used her own resources to create and produce an organizational workbag for her co-workers. The bags included cleaning products and patient information packets. "She shows pride in her work and is regularly recognized by the neonatal intensive care unit staff and the parents of patients. If parents need anything, she goes out of her way to make them feel comfortable. Her friendliness lifts everyone's spirit," says Jack Stires, director of environmental services.



Left to right: Maria Hoy, CMA; Lolita Reynolds; Sabina Kuduzovic; and Elizabeth Scott, RN. Not pictured: Joy Warner, RN.

To nominate someone for a quarterly award, call Clare Quinn at ext. 2-3641.

People News

Appointments

Daniel Deziel, MD, has been appointed acting chairperson of the Department of General Surgery. Deziel has spent most of the past 31 years in the department, starting as a resident, and is currently a professor and senior attending surgeon. Deziel is past president of the Society of American Gastrointestinal and Endoscopic Surgeons and immediate past president of the Chicago Surgical Society.

In December, **Howard Kaufman, MD**, joined Rush as the first director of the Rush Cancer Program and associate dean of Rush Medical College. Kaufman comes to Rush from New York's Columbia University, where he was chief of the Division of Surgical Oncology, director of the Columbia Melanoma Center and chairperson of the oncology service line at New York Presbyterian Hospital. The Rush Cancer Program comprises all of the cancer-related clinical, research and educational efforts at Rush. In the new program director position, Kaufman will be responsible for the program's strategic planning process and execution. He also will help guide the development, refinement and growth of the cancer service line.

Kudos

In December, **Rush** received a Healers Who Heal the Community award from Diversity Healthcare, Inc., in honor of the Medical Center's commitment to improving the quality of life for blacks and Latinos. Rush was chosen to receive the award in the Friends in Health-Health Systems category by a selection of insurance and finance professionals, parents and clergy people. Diversity Healthcare, Inc., is a Chicago organization that develops health and training programs for corporations, health professionals, schools and communities and provides free health education programs to black and Latino communities.

The American Society for Radiation Oncology (ASTRO) has selected **Carrie Daly, APN**, for its 2009 ASTRO Nurse Excellence Award, which is given to a registered nurse who goes above and beyond the normal standards of nursing practice. Daly received her award during ASTRO's annual meeting in Chicago this past November. Daly is an oncology nurse manager and advanced practice nurse in the Rush Department of Radiation Oncology. In the four years she has been at Rush, Daly has developed site specific educational materials for patients receiving radiation therapy and implemented skin care and mouth care protocols for radiation therapy patients. ASTRO is the largest radiation oncology society in the world, with more than 10,000 members who specialize in treating patients using radiation therapies.

Craig Della Valle, MD, orthopedic surgeon at Rush, has won the American

Association of Hip and Knee Surgeons Clinical Research Award. Della Valle received the award during the association's annual meeting in November in Dallas. He was honored for his study examining standard care for patients whose total hip replacements have failed because of infection, which may occur in as many as three percent of cases.

Mark Foreman, PhD, RN, College of Nursing, is collaborating with three engineers from the University of Illinois at Chicago on a study entitled "Effective Communication with Robotic Assistants for the Elderly: Integrating Speech, Vision, and Haptics." Funded by the National Science Foundation with American Recovery and Reinvestment Act of 2009 funds, this three-year study is a communication interface [a combination of speech, gestures and physical interactions (haptics)] between the elderly and a robotic assistant, with the goal of promoting independence of older people.

Steven Gitelis, MD, professor and vice chairperson, Department of Orthopedic Surgery, and director, Section of Orthopedic Oncology, was honored by the Michigan State University football team during a game this past October against Northwestern University in East Lansing, Mich. He was honored for his work on a football scholarship student who was diagnosed with osteosarcoma, a rare type of bone cancer not often seen in teenage boys. With assistance from his colleagues in the Limb Preservation Center at Rush, Gitelis helped the patient walk again. In addition to Gitelis, the team includes the following orthopedic surgery faculty members: **Walter Virkus, MD**, orthopedic oncologist, associate professor; **Mark Cohen, MD**, director, Section of Hand and Elbow Surgery, professor; and **John Fernandez, MD**, orthopedic surgeon, assistant professor. The patient was even able to work out with the Spartan team during practice — something many didn't think was possible.

Rush-Presbyterian-St. Luke's Nurses Alumni Association named **Judith J. McCann, PhD, RN**, professor in the Department of Adult Health and Gerontological Nursing and a research scientist with the Rush Institute for Healthy Aging, its 2009 distinguished alumna. She was honored at the association's homecoming celebration in September. Presented annually by the alumni association, this award honors alumni who have given distinguished service to the nursing profession and is the highest honor the association can bestow on one of its own members.

Kirk Packo, MD, professor, chairperson of the Department of Ophthalmology, received the Relja Zivojnovic Prize during the ninth annual Congress of the European Vitreo Retinal Society (EVRS) in September. Packo, a past president of the American Society of Retina Specialists (ASRS), received the award for

his outstanding achievements in the field of vitreoretinal training and for his support of cooperation between ASRS and EVRS. The prize is named for Relja Zivojnovic, one of the founders of vitreoretinal surgery.

Stephanie Pesa, a fourth-year doctor of audiology (AuD) student, has received the Sonus Foundation Scholarship. The Sonus Foundation Scholarship was established to financially assist third-year and fourth-year AuD students.

Guy J. Petruzzelli, MD, chief of the Section of Head, Neck and Skull Base Surgery in the Department of Otolaryngology, received the American Academy of Otolaryngology — Head and Neck Surgery (AAO-HNS) Distinguished Service Award at the 2009 AAO-HNSF Annual Meeting and OTO EXPO, in San Diego in October. AAO-HNS presents the award to medical professionals in recognition of extensive service through the presentation of instructional courses, scientific papers, participation on a continuing education committee or academy leadership position.

David C. Shelledy, PhD, Ellis Jones Endowed Chair and dean of the College of Health Sciences, was elected to the Association of Schools of Allied Health Professions (ASAHP) Board of Directors for a three-year term. Shelledy also is one of the five ASAHP commissioners who serve on the Commission on Accreditation of Allied Health Education Programs.

Beth Volin, MD, director, Division of General Pediatrics, and associate chairperson, Department of Pediatrics, received the Emory College Distinguished Alumni Award for leading community service programs for children at Rush, including the Kids Shelter Health Improvement Project (KidSHIP). In 1997, Volin founded the KidSHIP program, which has served more than 9,000 homeless children over the past decade, helping them receive comprehensive health care. She also serves as the director of the Rush Reach Out and Read Program, which promotes early literacy by giving children books in pediatric exam rooms.

Principal investigator **Wrenetha Julion, PhD, RN**, associate professor, College of Nursing, and her research team of **Debbie Gross, DNSc, RN**, the Leonard & Helen Stulman Professor at Johns Hopkins University School of Medicine and adjunct professor in the Rush College of Nursing; **Susan Breitenstein, PhD, RN**, instructor, Department of Community, Systems and Mental Health Nursing; and **Donald Waddell, MSW**, project director; have received funding for their project entitled, "The African American Non-Resident Fatherhood Program." This two-year project, funded by the National Institutes of Health, will entail the development of a fatherhood program for African American fathers who do not live with their children. The

project's long-term goal is to develop an intervention that will help these fathers develop and sustain positive involvement with their children.

Speech-language pathology students **Katherine Flood** and **Abigail Polglase** have been accepted as Illinois Leadership Education in Neurodevelopmental Disabilities (LEND) trainees, with **Karen Tessler, PhD**, assistant professor, Department of Communication Disorders and Sciences, serving as discipline coordinator. The students will be part of a large and multidisciplinary LEND traineeship at the University of Illinois at Chicago's Institute on Disability and Human Development. The LEND Interdisciplinary Training Program is a one-year training program that incorporates instructive and experiential learning in clinical and community-based settings.

Principle investigator **JoEllen Wilbur, PhD, RN**, professor and associate dean of nursing research and scholarship; and co-investigators **Lynne Braun, PhD, CNP**, professor, College of Nursing, and nurse practitioner, Rush Heart Center for Women; **Lou Fogg, PhD**, professor, Department of Psychology and College of Nursing; **Arlene Miller, PhD, RN**, professor and chairperson, Department of Community, Systems, and Mental Health Nursing; **Tricia Johnson, PhD**, associate professor, Department of Health Systems Management; and **Annabelle Volgman, MD**, associate professor of medicine and medical director, Rush Heart Center for Women; received a five-year grant from the National Institute of Nursing Research and the National Institutes of Health for a research project entitled "Reducing Health Disparity in African American Women: Physical Activity Adherence." The purpose of this clinical trial is to test the success of the Women's Walking Program, which consists of recommendations for an active lifestyle and telephone calls between visits to encourage physical activity and improve health outcomes.

The National Cancer Institute has awarded the **College of Nursing's Interdisciplinary Palliative Care Education Program** a fifth year of funding in the amount of \$267,689. This is the final year of the grant, which has been led by project director **Susan Breakwell, APHN-BC, DNP**, associate professor, College of Nursing.

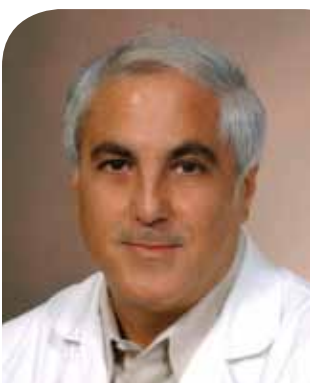
The U.S. Department of Health and Human Services recently awarded **Rush University Medical Center** its national medal of honor for the Medical Center's work in saving and enhancing lives through organ and tissue donation. Rush was one of 22 hospitals in Illinois to receive this honor for its collaborative work with Gift of Hope Organ and Tissue Donor Network. Gift of Hope is a nonprofit organ procurement organization that coordinates organ and tissue donation and services to families of donors in the northern three-quarters of Illinois and northwest Indiana.



Daniel Deziel, MD



Howard Kaufman, MD



Steven Gitelis, MD



Guy J. Petruzzelli, MD



David C. Shelledy, PhD



Beth Volin, MD



JoEllen Wilbur, PhD, RN

News Briefs

FREE COMMUNITY EVENTS

Rush University Medical Center offers an ongoing series of free community events led by Rush experts. Registration is requested for most events. To register, please call the Rush physician referral service at ext. 2-5555 or (888) 352-RUSH (7874).

Joint Preservation Treatment Options

Saturday, March 20, 9 to 11 a.m.

Searle Conference Center, fifth floor

Learn the latest treatment options for joint preservation of the hip and knee, including osteotomy, arthroscopy and resurfacing, from leaders in orthopedic treatment and research — the private practice physicians at Midwest Orthopaedics at Rush.

Stroke: Know the Warning Signs

Wednesday, March 24, 10 a.m. to noon

Searle Conference Center, fifth floor

Experts from the Comprehensive Stroke Program at Rush, which is certified as a primary stroke center, will present vital information about how to reduce your risk of having a stroke and how to recognize and respond to the warning signs.

New Developments in Dentistry to Combat the Aging Process

Wednesday, March 31, 10:30 a.m. to noon

Searle Conference Center, fifth floor

Oral health is an important component of general health and quality of life for older adults. Improved oral health can contribute to self-confidence, productivity and socialization. Join a discussion on the latest advances in dentistry to help you more easily maintain a healthy mouth.

Diabetes Management

Wednesday, April 7 and 28, 10:30 a.m. to noon

Searle Conference Center, fifth floor

Diabetes is a growing concern — nearly 40 percent of older adults have either diabetes or pre-diabetes, and many of them are unaware of it. Come learn more about the latest developments in the treatment of diabetes, including medications, blood glucose monitoring, healthy eating and exercise recommendations. Our experts also will discuss risk factors and prevention strategies for you and your loved ones.

Addressing Sensitive Issues in Men and Women

Tuesday, April 27, 6 to 8:30 p.m.

Armour Academic Center, room 994

Pelvic and abdominal health isn't always easy to discuss. As a result, problems often go undiagnosed and untreated, which can seriously affect your quality of life. Learn how you can prevent and address these issues with nutrition, physical therapy, exercise and, in some cases, medical and surgical treatments.

What You Need to Know About Women's Cancers

Wednesday, April 21, 5:30 to 7:30 p.m.

Armour Academic Center, room 994

The cancer program at Rush offers patients the latest treatments and research while providing customized, comprehensive care plans for patients. Join us at this free event to learn more about the diagnosis and treatment options for women with breast and gynecologic cancers as well as the latest information on prevention.



The Rush Gospel Choir entertains Rush employees, students and volunteers during the holiday party on Dec. 15.

STOP BY THE WOMAN'S BOARD GIFT SHOPS AND SEE WHAT'S NEW

If you haven't been to one of the two Woman's Board Gift Shops at Rush lately, you might be surprised to discover what's available there. The **Atrium Court Gift Shop** (located on the fourth floor of the Atrium Building, next to Au Bon Pain) now offers a Rush logo clothing line from Nike and Under Armour, plus unique gifts from Mariposa and others. The shop recently updated its fragrance offerings to include some of your favorite new perfumes. This store is open Monday through Friday, 8:30 a.m. to 6 p.m.

The **Atrium Gift Shop** (located on the fourth floor of the west end of the Atrium Building) offers snacks and beverages; magazines; greeting cards; toys; baby and children's gifts; and a lot more seasonal items (including Easter items). The shop now features a new line of healthy snack options — just in time to help you get back in shape after the holidays.

Don't miss out on all the new products both shops offer. Remember, 100 percent of net profits from the shops go to the Medical Center to help provide the best care for our patients and to support education, research and community service.



RUSH GENERATIONS HEALTH FAIR IS A HIT

Approximately 280 people attended the Rush Generations Health Fair on Nov. 6 in the Searle Conference Center. Participants included Rush Generations members, as well as older adults from communities all around Chicago and the suburbs. The four-hour event featured screenings for vision, hearing, heart health, glucose, cholesterol, blood pressure and more. Various Rush departments were on hand, as well as outside organizations. "We were very pleased with the turnout for the health fair," says Dana Bright, LSW, coordinator, community health. "Any time we can help people better understand their health issues and how to get the necessary information and services they need is a success."

Rush Generations is a free program for health and aging, offering a wide range of health promotion and disease prevention programs and events. To find out more, call (800) 757-0202 or e-mail rush_generations@rush.edu.



Melissa Frey, LSW (left), and Erin Woodhead, PhD (right), both fellows of the Rush Brighten program, provide screening and information related to aging and mental health, such as depression. The Brighten program evaluates adults 65 and older for depression and anxiety through their physician's office, offering follow-up care.

Rush and Social Media – Tweets, Blogs, Facebook and More

From Facebook to Twitter, from YouTube to our two new blogs, Rush University Medical Center is right in the middle of the social media revolution. Rush, one of more than 450 U.S. hospitals involved in social media, uses Twitter and Facebook to post regular updates about news and events at Rush — including everything from groundbreaking research and clinical trials to the Rush Transformation — along with photos, videos and interesting health-related stories on other Web sites.

Facebook, a social networking Web site, and Twitter (a "microblog" featuring posts of up to 140 characters) also enable Rush to interact with patients, employees and those who might benefit from Rush services and resources. Rush staff members regularly monitor what people are saying about the Medical Center and follow up to offer help or address their concerns.

Rush also has a fast-growing video library on YouTube, and it recently launched two blogs. Rush InPerson (rushinperson.rush.edu) is designed to give

the public an inside look at the people and programs at Rush, including doctors, nurses, researchers and patients, while the Rush News Blog aims to highlight top events, honors and research across the Medical Center and University.

Since launching its pages last summer, Rush has gained more than 900 followers on Twitter and almost 900 fans on Facebook. You can become a fan or follower of Rush by visiting any of the following sites:

Facebook: www.facebook.com/RushUniversityMedicalCenter and www.facebook.com/RushUniversity

Twitter: twitter.com/RushMedical

YouTube: www.youtube.com/rushmedicalcenter

Rush News Blog: rushnews.rush.edu

Rush InPerson blog: rushinperson.rush.edu

If you'd like to contribute to the Rush InPerson blog or have ideas or suggestions, please contact Thurston Hatcher at thurston_hatcher@rush.edu.

CHECK OUT THE GREEN TEAM'S WEB SITE

Rush's Green Team has a new Web site. To learn the latest about the Medical Center's recycling efforts, as well as read about past news and events, please visit www.rushu.rush.edu/sustainability.



NEWSrounds

Mission of Mercy — CLINICIANS AT RUSH TRAVEL TO HAITI TO HELP EARTHQUAKE VICTIMS

Two brothers, ages 10 and 6 years old, had lost their entire family in the devastating earthquake that struck Haiti on Jan. 12. They hadn't eaten in three days. When finally given food, the older boy gave his share to his younger brother, insisting that he eat to regain his strength.

For more information about Rush volunteers' medical mission work in Haiti, including photos and videos, please visit the Rush News Blog at rushnews.rush.edu.

It was just one of the many heart-wrenching scenes that clinicians from Rush have witnessed while in Haiti to provide medical treatment for earthquake victims and others in need of care.

The first team of volunteers from Rush left on Jan. 25.

"When the earthquake occurred, it was our natural instinct to want to go down there and help," says David Ansell, MD, MPH, vice president for clinical affairs and chief medical officer, who was part of the first volunteer team.

As of May 1, six teams totaling 42 clinicians from Rush have volunteered in Haiti. The trip by the first team from

the Medical Center was organized by Rush, while the teams that followed have been working in conjunction with a nonprofit humanitarian organization, International Medical Corps, which is helping coordinate medical volunteers.

The volunteers have included doctors and nurses in internal medicine, family medicine, orthopedics, surgery and other specialties. In March, Martin Gorbien, MD, director, Section of Geriatric Medicine, and Lauren Kessler, LCSW, Rush University Senior Care, were among the first older adult specialists to travel to Haiti to provide care at make-shift nursing homes.

Because the airport in Port-au-Prince, Haiti's capital, had been made inoperable by the earthquake, most of the volunteer teams have flown to Santo Domingo in the Dominican Republic, which shares a border with Haiti on the Caribbean island of Hispaniola. Traveling by truck and bus for up to 10 hours, the volunteers have made arduous drives over dirt roads to Port-au-Prince.

During the first team's 10-day stay in Haiti, they treated thousands of patients suffering from fractures, wounds, infections, even heart failure



One of the many collapsed buildings in Port-au-Prince, Haiti. Much of the city is in ruins.

and kidney failure. The physicians also performed as many as 30 to 50 surgeries daily and organized an intensive care unit in the tent hospital on the grounds of General Hospital, Port-au-Prince's main hospital. The first team also saw many medical problems that were the result of poor access to medical care in general, rather than being directly related to the earthquake.

"We wanted to make sure that future teams coming to Haiti would have better conditions than what we encountered. In the end, we were able to do the work we intended, despite the logistical challenges," says Stephanie Wang, MD, internal medicine. She led the first team,

a group of 19, which included clinicians from Rush, the John H. Stroger, Jr. Hospital of Cook County and the University of Illinois Medical Center.

Volunteers from Rush have reported being stunned by the extent of the devastation, which has left block upon block of buildings in ruins, and the overwhelming medical needs of earthquake victims. "It's like a scene from the Civil War," Ansell wrote in a Rush News blog (<http://rushnews.rush.edu>) about the scene at General Hospital.

One of Haiti's three nursing schools was completely destroyed, killing 150 students, and nurses are needed in Haiti

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New Coleman Foundation Comprehensive Brain and Spine Tumor Clinic OFFERS COLLABORATIVE CARE, ADVANCED TREATMENTS AND HOPE

Few diagnoses are more frightening than a brain tumor, news that often sends patients searching the Internet and traveling great distances to receive the most advanced care.

Those patients can find that care at Rush. Already home to one of the busiest brain tumor programs in the Chicago area, the Medical Center launched the new, multidisciplinary Coleman Foundation Comprehensive Spine and Brain Tumor Clinic earlier this year. The clinic treats both benign (non-cancerous) tumors and malignant (cancerous)

tumors, including tumors that have spread from other parts of the body.

A joint endeavor of the departments of neurological sciences, neurosurgery, and radiation oncology and the Division of Hematology/Oncology, the clinic brings together expert physicians at Rush who collaborate to determine the course of treatment for patients with these complex, challenging conditions. In addition, the clinic provides patients with advanced diagnostic procedures and the opportunity to partici-

pate in clinical trials of promising new therapies not available anywhere else in Chicago.

"We want to be the solution for patients with complex brain and spine tumors," says Richard Byrne, MD, chairperson of neurosurgery at Rush. Physicians with the clinic meet every Wednesday afternoon to review patient cases and discuss treatment plans. "We all have our own individual expertise, and this meeting is a way of airing everybody's opinions and arriving at a consensus as to what the appropriate treatment should be. The result is that patients get a much more thorough and balanced assessment of their situation and care that's specifically tailored to their individual needs," says Robert Aiken, MD, director of the Section of Neuro-Oncology and director of the Coleman Foundation Comprehensive Spine and Brain Tumor Clinic.

Aiken arrived at Rush at the beginning of the year from Mt. Sinai School of Medicine in New York City, where he was director of neurologic oncology and organized the brain tumor center, as he also had done previously at Jefferson Medical College in Philadelphia.

He joins another new arrival, Aidnag Diaz, MD, MPH, radiation oncologist, who most recently was director of image guided radiotherapy at

the Cancer Therapy and Research Center of the University of Texas Health Science Center in San Antonio. He also previously was medical director of the Northern Illinois University Institute for Neutron Therapy at Fermilab in Batavia, Ill.

Along with their Rush colleagues, Aiken and Diaz provide the necessary staffing to establish the clinic. "We were very fortunate to recruit them," Byrne says. "They're both nationally recognized people with lots of experience with clinical trials, and they're very used to working in a multidisciplinary team."

Eventually, the clinic will be part of the Rush University Cancer Center, which will be on the 10th floor of the Professional Building and is scheduled to open later this year. Until then, the clinic's physicians are coordinating their schedules so patients can meet with all of them on the same day in their individual offices. Patients then need to make only one trip to the Medical Center for their consultations.

"It's a lot more patient-and-family friendly to bring it all together in one visit. We'll also be going to each other's clinic space at times to meet together with patients," says Byrne,

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Left to right: Aidnag Diaz, MD, MPH; Richard Byrne, MD; and Robert Aiken, MD, confer about a patient case during one of the Coleman Foundation Comprehensive Brain and Spine Tumor Clinic's weekly conferences.

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NEW CLINIC

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whose office is just two floors below Aiken’s in the Professional Building.

The clinic offers patients advanced diagnostic capabilities, using state-of-the art imaging techniques — including spectroscopy, MRI, CT scans and PET scans — that can detect even tiny tumors deep within the brain. As part of the effort to identify the best individualized treatment options, the clinic also performs genetic testing of many tumor samples.

The Coleman Foundation Comprehensive Brain and Spine Tumor Clinic can provide patients with the most advanced neurosurgical, chemotherapy and radiation therapy treatments available, including the following protocols:

- Surgery guided by a wide array of advanced imaging in order to maximize tumor removal while protecting patients, including functional MRI to locate speech and motor areas in the brain, MRI conducted during surgery, cortical mapping of the functional areas of the brain, carbon dioxide laser and high definition endoscopy
- Minimally invasive surgical techniques that reduce risks and speed patient recovery; advanced skull base surgery that allows for treatment of tumors that previously were considered inoperable
- An array of chemotherapies and biological therapies
- Vaccine therapies

- Stereotactic radiosurgery, which delivers a high dose of focused radiation with millimeter precision to the affected part of the brain
- Intensity-modulated radiation therapy, which delivers radiation in multiple small doses guided by daily imaging, allowing the treatment to be customized to the size and location of a tumor while minimizing radiation exposure to nearby tissue

Patients also will have the option of participating in clinical trials of the latest therapies. In February, Rush was accepted into the North Central Cancer Treatment Group (NCCTG), the Mayo Clinic-National Cancer Institute led consortium for clinical trials. Rush is the only medical center in the Chicago area that is in the consortium and able to make these trials available.

“There are new therapies that we hope will offer a better outcome than existing treatments and aren’t available except in a clinical trial,” Aiken says. “There also will be clinical trials that I will develop myself and trials that will be available outside the Mayo consortium.”

The NCCTG trials currently are undergoing review by Rush’s Institutional Review Board, which is responsible for making sure that all research involving patients is safe. Aiken hopes to receive clearance to begin enrolling patients in the trials by June.

Along with clinical research, the clinic is contributing to the Medical Center’s basic science research endeavors by creating a tumor registry that will store all the tumors

that are surgically removed from patients. Rush researchers will analyze these samples to try to better understand the causes of brain tumors. Studies already are underway to determine how gliomas (a type of brain tumor) resist chemotherapy and the role certain developmental genes play in glioma development, in order to determine if blocking those genes will stop the tumors from growing.

Non-cancerous brain tumors once were fatal, but now can be cured with surgery, sometimes in combination with radiation therapy and biological therapy. Although brain cancer currently is not considered curable, Aiken hopes that the combination of physician collaboration and cutting-edge treatment options will enable the Coleman Foundation Comprehensive Brain and Spine Tumor Clinic to prolong the lives of patients for extended lengths of time.

“While many cancers are not curable, we can treat them for a number of years,” he observes. “Our hope is we can do the same for brain tumors until we’re able to offer curative therapy.”

Each of the comprehensive cancer clinics in the Rush Cancer Center is named for The Coleman Foundation, a private, independent grantmaker focusing primarily on the Midwest. The foundation has made a \$5 million challenge grant to create a comprehensive outpatient cancer center at Rush. That means the foundation will match every gift made to the outpatient cancer center, up to a \$5 million maximum. It is the largest single grant in the foundation’s nearly 60-year history.

ASSISTANT SECRETARY OF AGING VISITS RUSH TO HEAR CAREGIVER STORIES

The role of a caregiver for an older adult is a complicated one, often leaving the individual feeling isolated and mentally and physically drained. As baby boomers age, members of more and more families will take on this challenging role. According to the U.S. Administration on Aging, people 65 years or older numbered 38.9 million in 2008 – representing 12.8 percent of the U.S. population. By 2030, this number will grow to approximately 72.1 million.

To learn more about the issues that these caregivers face, Kathy Greenlee, assistant secretary for aging in the U.S. Department of Health and Human Services, visited Rush’s Johnston R. Bowman (JRB) Health Center on March 16. She toured the center’s facilities, spoke with Rush staff and met with caregivers who provide care for family members. “The work you’re doing here is Herculean,” Greenlee said.

Greenlee’s visit to Rush was part of a national tour of senior care facilities that she’s making to solicit recommendations to incorporate into the reauthorization of the Older Americans Act. The act, which expires in 2011, contains a key provision in support of caregivers.

During Greenlee’s visit, she listened to a room of more than 20 caregivers share their stories about assisting their spouses, partners, mothers, fathers and other family members. “I want to hear your stories and find out what your needs are as caregivers,” Greenlee said.



From left to right: Madeleine Rooney, MSW, liaison, Older Adult Programs; Kathy Greenlee, Assistant Secretary for Aging, U.S. Department of Health and Human Services; and Anthony Perry, MD, attending physician, Section of Geriatric Medicine.

The caregivers’ stories were heart-wrenching, as one person after another described the obstacles in navigating the health care system, including insurance issues, obtaining quality care or even finding the time for a few hours to themselves. One woman summarized what everyone in the room felt: “There have to be options so you can care for people at home with dignity.”

Greenlee selected Rush for her site visit because of the excellence of its Older Adult Programs, which are housed in JRB. These programs encompass a wide range of activities to help seniors and their caregivers, including Rush Generations, a free health and aging membership program,

and the Anne Byron Waud Resource Center, which provides counseling, community resource assistance and other supportive services for older adults and caregivers. For more information about the Older Adult Programs, please visit the Rush Web site at www.rush.edu.

“We are honored that Assistant Secretary Greenlee thought highly enough of the Older Adult Programs to visit Rush, and we look forward to partnering with her in the future to help us provide quality, much-needed care for the growing number of older adults in the country,” says Robyn Golden, LCSW, director of Older Adult Programs.

NEWSrounds

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Editor
Anne Burgeson

Managing Editors
Elizabeth Higgins and Kevin McKeough

Contributors
Cassie Vanderwall, Nancy DiFiore and Judy Germany

Designer
Kristen Marzejon

Photographers
Steve Gadowski, Leo Garcia and Bill Richert

Have a news item or story idea for *NewsRounds*? Contact the editor at: Phone: 942-5582 Fax: 563-4149 E-mail: anne_burgeson@rush.edu

Marketing and Communications
Triangle Office Building
1700 W. Van Buren St., Suite 456
Chicago, IL 60612

RUSH HELPS HAITI VICTIMS

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now more than ever to assist in providing basic care. Of the roughly 100 clinicians at Rush and partnering institutions who've expressed interest in volunteering in Haiti, approximately 75 percent have been nurses.

Three nurses from Rush, Sharon Dopak, RN, BA, MS medical intensive care unit; Patricia Huerta, BSN, emergency department, and Meagan Grant, BSN, MPH, 8 South Atrium, worked together in the General Hospital's emergency room (ER), which comprised three tents set up near the front of the entrance to the hospital grounds. They described it as similar to any other ER with the exception that they didn't know what supplies would be available on a day-to-day, shift-to-shift basis.

"It was emotionally difficult treating some of these patients, as we were limited by what treatments we had available," Huerta explains. "By the time I left, they had one portable, battery-operated ventilator, which was the only one outside of the operating room. That for me was one of the hardest parts, knowing that there was no way of sustaining advanced life support."

Grant describes the devastation in Haiti as unimaginable, and not simply because of the earthquake. "It's abundantly clear that Haiti was in a state of disrepair long before Jan. 12. Evidence of political, social and economic strife can be seen in the crumbled buildings, malnourished children, and thousands upon thousands of tents and scrap metal homes throughout the city," she says. "The enormity of the task ahead of this country really can't be grasped until you see it, and even then it's pretty mind boggling."

While the destruction and human suffering they witnessed is immense, the volunteers from Rush also have reported being inspired by resilience and compassion of Haitian people. They've recounted the stories of relatives and neighbors digging out people from the rubble, orphaned children looking after each other, and people whose homes remained intact taking in some of the countless homeless who now live in Haiti's streets.

The strongest medical need in Haiti now seems to be primary health care. While volunteering in Haiti in late February, Cynthia Waickus, MD, family physician, reported in several Rush News blog posts that there were numerous cases of malaria and typhoid. "I actually saw a case of measles, and my colleague saw two siblings with mumps. These were firsts for both of us," Waickus wrote.

Teams from Rush will continue to travel to Haiti in the coming weeks and months, because there will continue to be a need for nurses and doctors, especially as diseases become more prevalent in the earthquake's aftermath. Mamta Malik, MD, attending physician from the emergency department, is responsible for organizing more teams from Chicago to Haiti.

"We just have to keep giving," Ansell says. "There's a lot more that has to be done to help this country."

If you're interested in volunteering in Haiti, please contact Jacob Langley at jacob_d_langley@rush.edu or at ext. 2-8041.



The first group of volunteers from Rush.

"While this experience was extremely difficult and emotionally taxing, it was so rewarding. The resiliency of the Haitian people was inspiring."

— Patricia Huerta, BSN, emergency department

"Although filled with sad stories and tragedy, my time in Haiti renewed my faith in humanity and reignited the reasons I entered medicine in the first place."

— Jeff Mjaanes, MD, pediatric sports medicine expert at Rush



With the help of a translator, Keith Boyd, MD, meets with a patient.



The ruins of one of Haiti's three nursing schools, which was destroyed during the earthquake.

"We all feel a bit guilty. We came down here to help Haiti and are leaving this place having gained much more than we have given."

— Cynthia Waickus, MD, family physician at Rush

"The toll has been great on all of us. Some of us questioned the work in terms of how much impact we have considering the enormity of the situation. One thing that gave solace was the realization that the patients understood the rest of the world really cared about them. And you can't measure that."

— Joel Augustin, MD, family physician at Rush and native of Haiti



Many Haitians now live in tents on the city sidewalks, afraid to go into their homes because of their fear of future earthquakes.

All photos appearing in this story were taken by Rush clinicians who have traveled to Haiti this year.

The relief effort in Haiti continues to need financial support. To make a donation to the relief efforts, please visit The Salvation Army at www.salvationarmy.org or the American Red Cross at www.redcross.org.

Lasting Hope

THE RUSH TRANSPLANT PROGRAM PROVIDES EVEN HIGH-RISK

Finding out he'd need a liver transplant in order to live was frightening enough for Michael Loudon. Finding out he might not be able to get one was much worse.

Loudon was diagnosed with liver cancer in 2007, and by early 2008 his condition had worsened to the point that he was going to need a transplant. By then, his cancer also had caused him to develop pulmonary hypertension — high blood pressure in his lungs and heart — a condition that made him too high a risk to receive a transplant at some hospitals.

Loudon was referred to Rush, where the abdominal transplant program, led by Forrest Dodson, MD, director of abdominal transplantation, successfully has taken on such high-risk cases. "Dr. Dodson took the time to explain everything. He didn't sugar-coat the seriousness of the illness or the surgery itself, but at the same time he told me they could do it, and I believed him," the 50-year-old Loudon says.

In September 2008, Loudon went on the waiting list for an organ donor. Because of the pulmonary hypertension, he needed a liver that was a perfect match for him, and the Rush team carefully screened possible donor organs, twice determining that a seemingly good fit wasn't good enough.

In February 2009, the right organ became available, and Loudon received his liver transplant. The operation took more than 10 hours because Loudon's blood pressure spiked repeatedly, forcing his surgeon, Edie Chan, MD, assistant professor of surgery, to wait for it to lower.

More than a year after the operation, Loudon's cancer and his pulmonary hypertension both are gone, and he's again healthy enough to resume his daily three-mile walks with his three beagles in the forest preserve near his northwest side home. Loudon also hopes to return to his job as a watchman soon.

"Dr. Dodson and Dr. Chan saved my life. They're responsible for me being alive today," he says.

"WE TALK TO EVERYONE WHO COMES TO US"

Loudon is one of many transplant patients with added complications whose lives have been saved at Rush. "We're a center that is known for taking high-risk patients," says Edward Hollinger, MD, PhD, assistant professor of surgery, the surgical director of Rush's pancreas and living donor kidney transplant programs. In addition to Dodson, Hollinger and Chan, the surgeons in the abdominal transplant program include Stephen Jensik, MD, director of kidney transplant, and Mark Dy-Liacco, MD, assistant professor of surgery.

"We get sicker patients, we get patients that fail other people's selection criteria, we save their lives, and we transplant them more quickly," adds Rachel Thomas, MBA, BSN, RN, CNN, service line and program administrator, solid organ transplant, hepatology and nephrology.

"We are a center that is aggressive about the livers and kidneys that we transplant," Hollinger says. Last fall, Rush was among the medical centers that received the U.S. Department of Health and Human Services' Medal of Honor for Organ Donation in recognition of their success in increasing

the number of organs available for transplantation.

As a result of this effort, the median wait time for a kidney transplant at Rush is 39.7 months, compared to 44.4 months nationwide; for a liver transplant, it's less than two months (1.9), compared to almost a year (11.3) nationally.

The program's patients include people with additional serious medical problems beyond their need for a transplant, like Mike Loudon; people who were transplanted previously; people who are severely overweight, which can cause post-transplant complications; and a high number of Medicare and Medicaid patients, who make up 82 percent of transplant recipients at Rush.

"We transplant anyone for whom it's possible, without regard to socioeconomic status," Thomas says. "We talk to everyone who comes to us. We evaluate every-one individually."

HANDS-ON, COLLABORATIVE TEAM

Each of these patients receives highly individualized care throughout the emotionally, physically and financially challenging transplant experience. "We're one of the most hands-on centers, from the listing process to after the transplant," Thomas says.

In addition to extensive personal consultation with their transplant surgeon, patients are assisted by the same transplant nurse throughout the pre-transplant phase, and a similarly dedicated post-transplant nurse. A living donor transplant coordinator also is available to consult with families of kidney transplant



Rush transplant patient Mike Loudon talks with his surgeon, Edie Chan, MD.

patients to determine who would be the best match out of the available candidates.

The program's social workers also assist patients and their families to help them stay on the right track following transplant with regard to their medications, follow-up care and wellness. "We'll work with them to build the support they need and to develop family systems around them. Rather than being critical when they make mistakes, we want to help them to do the right things for themselves," Thomas says.

Even under the best of circumstances, transplant is a high-risk procedure, and the team works collaboratively to provide patients with the best chance of a successful outcome. Team members round together, seeing patients and discussing their care.

"We are good and aggressive at dealing with high-risk patients, and it carries over into our care of the less risky patients, too," Hollinger says. "The nurses, surgeons, other physicians and staff all are experienced and caring. We work with a population that is challenging, and we have to be on our A game."

BY THE NUMBERS: THE RUSH TRANSPLANT PROGRAM

- The Rush transplant program annually performs about 120 kidney transplants, approximately 60 liver transplants, around a dozen heart transplants and about a half dozen pancreas transplants (usually in conjunction with kidney transplants).
- Over the past six years, the Rush transplant program has served more minority patients than any other transplant center in Illinois, providing about a quarter of all transplants statewide for both black and Hispanic patients.
- Overall, the Rush abdominal transplant program encompasses about 50 people, including five surgeons and seven additional physicians; 20 specialty nurses; and support staff, including social workers and two financial liaisons who work with patients on insurance issues.
- Between them, the members of the dedicated transplant team speak 16 different languages, including Mandarin, Polish, Serbian and five Spanish dialects.

Rush University Students Mark King Day With Service

Martin Luther King Jr. famously declared that "Life's most persistent and urgent question is: What are you doing for others?"

More than 100 Rush University students and employees answered that question by taking part in a day of volunteer activities on Martin Luther King Jr. Day, Jan. 18, joining hundreds of thousands of people nationwide in making the federal holiday a day of service.

Instead of sleeping in or getting caught up on their studies, students cooked breakfast for the homeless; renovated a children's science center; and assembled care packages for U.S. military personnel serving in the Middle East.

"It was a chance to reach out to the community in a way we don't normally," says Amanda Wiltz, a first-year Rush Medical College student who organized the volunteer activities.

Arriving as early as 4 a.m., students cooked and served breakfast for approximately 250 homeless people who spent the night at the Franciscan House of Mary and Joseph, a shelter about a mile from the Rush campus.

Later that morning, students painted a mural in the science room of the James R. Jordan Boys and Girls Club and Family Center, a few blocks northwest of Rush. In addition, they stocked the room with books and lab supplies,

including two powerful microscopes, donated by Rush.

During the day, students also hosted a veterans fair on the ninth floor of the Armour Academic Center at Rush. The event included a variety of activities to help military personnel and their families re-assimilate and adjust to their return to civilian life.

As part of the veterans fair, Rush students assembled more than 200 care packages for men and women serving in the U.S. military in Iraq and Afghanistan, with help from more than 100 students from the Laurance Armour Day School and other schools near Rush. The packages included both necessities and wish list items, all donated by Rush students and employees. In addition, the veterans



Rush students assembled care packages for U.S. troops serving in Iraq and Afghanistan.

fair raised nearly \$3,000 for the Salvation Army's work in Haiti.

"Our students come here because of Rush's commitment to our community and to giving back. They're compassionate, committed individuals," says Sharon Gates, MA, interim director of multicul-

tural student affairs and director of the Office of Community and Global Health at Rush, who helped the students organize the events. "Through their words and deeds, today and throughout their careers, they will be paying tribute to all Dr. King stood for."

PATIENTS WITH A NEW CHANCE



THE GIFT OF LIFE: ONE ORGAN DONOR’S STORY

In addition to overseeing Rush’s abdominal transplant program, Rachel Thomas, MBA, BSN, RN, CNN, has experienced the transformative effect of transplant firsthand. Nearly seven years ago, Thomas — who is service line and program administrator, solid organ transplant, hepatology and nephrology — donated one of her own kidneys to be transplanted into her husband at the time, who previously had spent 13 years on dialysis due to kidney illness.

“We had a baby, and I knew the quality of life for my entire family would improve,” Thomas says. “We’d been working our life around being at a dialysis center three days a week.”

Thomas underwent a minimally invasive laparoscopic procedure to donate her kidney, spent less than a day in the hospital and went back to work eight days later. She also had a second child after making her donation, and the entire family has remained in good health since.

Although Thomas and her husband eventually divorced, she’s glad she could provide him with

his life-changing gift. “I’m grateful that my kids’ lives aren’t built around seeing their dad’s illness,” she says.

Not surprisingly, Thomas is a strong advocate for organ donation, especially for kidney donation by living donors. “Donations by living donors always have better outcomes and better survival rates than donations from deceased donors. Living donors also have an emotional investment in the other person, which enhances quality of life and survival,” Thomas says. “If my husband had received a deceased donor kidney, that would have been one less kidney out there for someone else, so I’ve kind of saved two lives,” she adds.

Thomas encourages people to register to be organ donors, which can be done online at <http://www.donatelifeillinois.org>.



Rachel Thomas, MBA, BSN, RN, CNN

As part of Rush’s efforts to encourage organ donation, the Donate Life Flag now is featured on the Rush intranet site (<http://rushportal.rush.edu/rushportal/appmanager/rushportal/desktop>). The flag waves every day a patient at Rush donates an organ or receives a transplant.

The availability of donor organs is literally a life-or-death matter for the hundreds of patients waiting for transplants at Rush, and the thousands more throughout Illinois. To register to be an organ donor or for more information, please visit the following sites: www.donatelifeillinois.org, www.giftofhope.org or www.lifegoeson.com.

INSPIRED BY PERSONAL ILLNESS, RUSH COLLEGE OF NURSING STUDENTS GIVE THE GIFT OF LIFE

The blood and platelet transfusions Dana Merk and Lance Oleson received years ago at Rush enabled them to fulfill their dreams of becoming nurses. Now, the two Rush University College of Nursing graduate students volunteer their time and tell their stories in order to encourage others to be blood and platelet donors.

“If it weren’t for the selfless acts of others, I would not be here today. Now that I’m healthy, it’s my responsibility to help,” Oleson says. He is a former leukemia patient of Parameswaran Venugopal, MD, Samuel G. Taylor III, MD, professor of oncology; professor of medicine;

and co-director of the Section of Hematology at Rush.

“The care of Dr. Stephanie Gregory [director of the section of hematology at Rush] and the incredible nursing staff at Rush inspired me to become a nurse,” Merk says. “I am thankful to have been a recipient of blood platelets countless times during my treatment for acute myeloid leukemia almost six years ago.”

Oleson and Merk will graduate from the Rush University College of Nursing this year.

The Rush Blood Center provides both transfusion and stem cell processing services. The center

receives more than 70,000 orders for transfusions a year.

“A donation of blood or platelets at the Rush Blood Center directly benefit patients here at Rush. Because we need more blood than we have donors to provide, we turn to the American Red Cross for additional supply. Whether you donate here at our center or give to American Red Cross or LifeSource, your donation may save someone’s life,” says Malissa Lichtenwalter, apheresis blood donor recruiter, Rush Blood Center.

Rush also has a Babies First Blood Donor Registry. “Infant surgeries

often are scheduled on short notice and require fresh units of type O blood, which adult donors can provide” Lichtenwalter says. “By collecting and storing these units in our donor center, we can best assure that blood will be available for them immediately.”

To sign up for the Rush Babies First Blood Donor Registry, or learn more about blood and platelet donation, contact Danielle Bakulinski, blood bank receptionist, at ext. 2-6680 or danielle_bakulinski@rush.edu. Or visit the Rush Blood Center Web site at <http://budurl.com/rushbloodcenter>.



Dana Merk



Lance Oleson



Match Day SETS FUTURE COURSE FOR STUDENTS

In an annual rite of spring, Rush Medical College students learned where they would continue their medical training on Match Day, which took place on March 18. The fourth-year students gathered that morning at the Robert W. Sessions House on the Rush campus.

At 11:00 a.m. Chicago time, the students were allowed to open the letters identifying their residency assignments when the results from the National Residency Matching Program simultaneously were released to all senior medical students across the United States. The program matches fourth-year students at medical schools throughout the United States with the residency programs where they will undertake training in their chosen medical specialty training.

This year, 135 Rush medical students were matched with residency programs in 19 specialties at hospitals in 23 states and the District of Columbia. Eighteen Rush students will remain at the Medical Center for their residencies next year, while other students will train in residency programs at such institutions as the Columbia University Medical Center, Harvard Affiliated Hospitals, John H. Stroger Jr. Hospital of Cook County, University of Chicago Medical Center and Vanderbilt University Medical Center.

The residencies will begin following the June 12 commencement ceremony for Rush University, which will be held at the UIC Pavilion. Students in the College of Health Sciences at Rush University, the Graduate College of Rush University, Rush Medical College and the Rush University College of Nursing will receive their degrees during the ceremony.

Left to right: Rush Medical College students Karen Ganacias, Purvi Patel, Neethu Muppadhyil, and Shital Patel display the letters with their residency assignments.

Employee Awards

4th QUARTER

Each quarter, Rush employees are recognized for going above and beyond for patients, families, visitors and coworkers. These employees are shining examples of the Rush I CARE values (innovation, collaboration, accountability, respect and excellence). The following are the winners of Rush’s awards for the fourth quarter of fiscal year 2009.

EMPLOYEE OF THE QUARTER

Ellen Elpern, RN, clinical nurse specialist and nurse practitioner in the Medical Intensive Care Unit (MICU), is both a strong advocate and an important clinical resource for patients and nurses. She provides them with instruction, clinical expertise and support. In addition to her responsibilities as a nurse, she presents cases of morbidity and mortality that occur on the unit to help staff make sense of complex cases. “We are so thankful to have Ellen as our clinical nurse specialist. Her willingness to mentor staff does not go unnoticed and we are thrilled to nominate her as employee of the quarter,” says Melissa McDonald, RN, BSN, medical/surgical nursing, MICU.



MANAGER OF THE QUARTER

Kathleen Fisher, RN, clinical nurse manager, Rush University Internists, demonstrates respect and accountability through her willingness to examine her efforts constantly in order to improve her performance and to be a fair and supportive manager. “In the past four years I’ve observed Kathleen in countless situations in which her calm levelheadedness and compassion for patients and staff have always prevailed,” says Laurie Bederow, LCSW, project coordinator, BRIGHTEN Program. “She deals with a high volume of often high-demand patients, while managing an unusually large and diverse staff. She brings her considerable clinical skills to patients and unconditionally supports her staff.”



TEAM OF THE QUARTER

When several nurse coordinators left the kidney transplant program late last year, two post-transplant nurses quickly adapted their schedules to accommodate the demands of the pre-kidney transplant clinic. While learning the challenges of their new roles, these nurses worked with the pre-transplant team and brought new knowledge, innovations and improvements to the existing clinical process. “It has been a great experience witnessing the kidney transplant coordinators’ collaboration and their contributions to meeting the transplant program’s needs,” says Mary Hellmich, BSN, RN, clinical nurse manager, University Transplant Program. “They are truly an exceptional, professional and dedicated team of nurses who have transformed a challenging situation into one of exciting metamorphosis.”

The kidney transplant program nurse coordinators team (seated, from left) Sarah Muench, RN, Mary Hellmich, RN, manager, Theresa Partida-Aguirre, RN and Pamela Rohde, RN; (standing, from left) Heather Clark, RN, Elizabeth Myers, RN, Lena Christudhas, RN and Damaris Echeverria, RN. Not pictured: Jennifer Gilsdorf, RN, Husai Kelliher, RN, Linda Murphy, RN, Richard Reyes, RN, and Maria Sieczka, RN.



CAROL STEGE AWARD FOR ENVIRONMENTAL SERVICES

Wendy Sharp, environmental specialist, is part of the team on 7 South Atrium that cleans patient rooms after patients are discharged. Her work is evident in the excellent condition of the rooms that she is responsible for maintaining. “She has something special. She has the sincere passion for serving people. Her spirit has been a part of our team’s efforts for a long time,” says Veronica Flett, operational manager. “She takes the patient experience to another level. She is solid and consistent.”



RUSH VALUES AWARD

When a patient with a complex medical problem is admitted, the staff must pull together and collaborate as efficiently as possible while making sure that other patients are being cared for in a timely fashion. The medical oncology unit on 8 South Atrium recently had such a situation arise on their unit. For two hours the team worked tirelessly on a challenging admission while collaborating with staff to ensure that other patients’ needs were being met. “Their teamwork ensured the patient’s safety and stability, as well as thorough documentation,” says Julie Haubenstein, RN, medical oncology unit. The team includes Craig Barrows, RN; Mark Hagery, RN; Stefanie Pagel, RN; Lisa Prytula, RN, unit director; Latisha Ward, patient care technician; and Rochelle McWilliams, patient care technician.

The 8 South Atrium challenging and delicate patient situation team, a group of individuals who provide end-of-life care, demonstrated great compassion when a patient’s condition deteriorated very quickly the day before he was expected to go home. The team helped maintain the patient’s comfort while arranging for his family to spend his last hours with him in the hospital. The team includes Gary Blakely, RN; Katie Herricks, RN; and Lisa Prytula, RN, unit director. “I was not the only one who noticed Katie and Gary’s persistence and expert patient advocacy that night,” says Julie Haubenstein, RN. “In fact, the first thing the patient’s daughter said to them was ‘Thank you for your care. My father died with dignity and in peace.’”

PATIENT SATISFACTION “STAR”

Every quarter, an employee whose name appears in two or more favorable patient evaluations is awarded the patient satisfaction “star” award. This quarter, five stars were honored: Emily Dinnerville, nursing assistant, 9 South Atrium; Julie Haubenstein, RN, 8 South Atrium; Christy Ladd, RN, 2 Pavilion; Cathie Novick, RN, Rush Associates in Women’s Health; and Denise Delaurentis, senior coordinator, patient special services. Their patient evaluations included the following comments:

- “Emily went out of her way to get me some shampoo and helped me to wash my hair.”
- “My nurse Julie had a fresh pot of coffee ready for me after my procedure. It was much appreciated!”
- “I loved the nursing staff. I had been out of my room for a procedure and so no dinner was brought to me. Christy went out of her way by offering me her own meal. That meant a lot to me!”
- “Cathie was full of smiles and cheerful. She is a great example for others to follow. She made me feel that she was truly available and wanting to help address my concerns or questions at any time.”
- “Denise assisted my mom in finding a comfortable place to stay while waiting for surgery.”

(Seated, from left) Julie Haubenstein, RN and Emily Dinnerville; (standing, from left) Catherine Novick, RN, and Denise Delaurentis. Not pictured: Christy Ladd, RN.



To nominate someone for a quarterly award, call Clare Quinn at ext. 2-3641.

People News

Appointments

Kalyan Latchamsetty, MD, attending physician, urology, recently received a three-year appointment as cancer liaison physician for the cancer program at Rush. Cancer liaison physicians are an integral part of cancer programs accredited by the American College of Surgeons Commission on Cancer. Latchamsetty is among a national network of more than 1,600 volunteer physicians who are responsible for providing leadership and direction to establish, maintain and support their facilities' cancer programs.

The Centers for Medicare and Medicaid Services appointed **Elaine Scorza, MS, APRN, PMH-CNS BC, CRN-C advanced**, Department of Psychiatry, to the Medicare Evidence Development and Coverage Advisory Committee. Scorza is one of 96 people who will meet regularly to develop and review proposed criteria for Medicare reimbursement.

Ed Ward, MD, will serve as the Rush Transfer Center medical director, and **Melinda Noonan**, director of nursing operations, will be the hospital executive responsible for the transfer center. Rush is moving its existing patient transfer systems to a more coordinated transfer center model, which is a formalized approach to supporting

outside hospital transfers into the hospital, including admission procedures, logistics and transportation.

Kudos

The American Speech-Language-Hearing Foundation (ASHF) awarded **Julia Cheng**, a third-year Doctor of Audiology student, a graduate student scholarship. Cheng received the \$4,000 scholarship during the ASHF's annual awards meeting last November in New Orleans. This national award is based on outstanding academic achievement.

Craig Della Valle, MD, orthopedic surgeon at Rush, coauthored a study on the diagnosis of early postoperative infection following primary total knee arthroplasty. The study earned the Mark Coventry Award from the Knee Society, which Della Valle received in March during the 2010 Knee Society/American Association of Hip and Knee Surgeons meeting.

Robyn Golden, LCSW, director of Older Adult Programs, received the American Society on Aging's Mental Health and Aging Award. This award is given to an outstanding professional who has demonstrated continued excellence in direct or indirect service to the mental health or dementia care of older adults and their families and who has had a profound and lasting impact on the



Kaylan Latchamsetty, MD

mental health of older adults, through practice, teaching, research, advocacy or policy planning.

Paula Meier, DNSc, RN, professor and director for clinical research and lactation at Rush, was elected president-elect of the International Society for Research in Human Milk and Lactation, which is the only international organization devoted to research and scholarship related to human milk.

Madeleine Rooney, MSW, liaison, Older Adult Programs, received the American Case Management Association Illinois Chapter's Innovation Award. She was nominated by Sandy McFolling, MS, RN, ACM, director of case management, for her groundbreaking work in developing the Enhanced Discharge Planning Program (EDPP) at Rush. The EDPP was initiated in March 2007 as a joint collaboration between Older Adult Programs and the Case Management Department at Rush to provide post-discharge phone contact and short-term care coordination for at-risk patients as they transition from hospital to home.



Ed Ward, MD

Cheryl Scott, PhD, professor, Department of Communication Disorders and Sciences, along with Catherine Balthazar, PhD, of Governor's State University in University Park, Ill., received a clinical research grant for \$50,000 from the American Speech Language Hearing Foundation. Their project, "Building Sentence Complexity: An Intervention Study for School-Age Children with Oral and Written Language Disorders," will measure outcomes of a treatment protocol designed to improve comprehension and production of higher-level language in school-age children and adolescents with specific language impairments that affect academic performance.

Katie Kompoliti, MD, and **Leo Verhagen Metman, MD, PhD**, and their colleagues in the Parkinson's Disease and Movement Disorder Center at Rush have edited an Elsevier Major Reference Work entitled *The Encyclopedia of Movement Disorders*. The three-volume publication contains several entries from physicians at Rush and will be available in the Rush library.



Craig Della Valle, MD



Robyn Golden, LCSW



Madeleine Rooney, MSW

RHEUMATOLOGY, COMMUNICATION DISORDERS AND SCIENCES, AND OTOLARYNGOLOGY – HEAD AND NECK SURGERY TO MOVE INTO ORTHOPEDIC BUILDING

Three different groups of physicians and scientists at Rush University Medical Center will move into the fifth floor of the Orthopedic Building between May and July, resulting in expanded and improved medical services, increased convenience for patients and greater collaboration within and between the departments.

University Rheumatologists will move into the building in May, with the Section of Communication Disorders and Sciences, and the Department of Otolaryngology – Head and Neck Surgery scheduled to follow in late June. A number of otolaryngology faculty members also will relocate their private practices to the building in late June and early July.

Located at the corner of Ashland Avenue and Harrison Street, the Orthopedic Building has been home to the Rush Department of Orthopedic Surgery and Midwest Orthopaedics at Rush, a private physician practice, since the building opened last November. Work on the fifth floor has continued since then to prepare for the arrival of the other programs.

UNIVERSITY RHEUMATOLOGISTS

University Rheumatologists at Rush, a clinical practice of physicians on the faculty of the Rush Section of Rheumatology, provides treatment for arthritis, vasculitis, scleroderma, lupus and other rheumatic diseases, as well as treatment for osteoporosis.

The practice has outgrown its current location on the 10th floor of the Professional Building, which will be renovated to house Rush's new outpatient cancer center.

In addition to providing more elbow room, the larger space in the Orthopedic Building will accommodate University Rheumatologist's new clinic for adults with connective tissue diseases, such as osteogenesis imperfecta and Ehlers-Danlos syndrome. The clinic will open in July and will be the only one of its kind in the Midwest. "These are fairly ill individuals who require specialized care," says Joel Block, MD, Willard L. Wood, MD, Professor, and director of University Rheumatologists and the Section of Rheumatology. He and his colleagues have expertise in these and other noninflammatory illnesses of the joints and connective tissues.

The new location also will accommodate the practice's acquisition of new musculoskeletal ultrasound equipment, which the rheumatologists will use for noninvasive diagnosis of arthritis and to guide injections of medication accurately into the hip and other joints.

In addition, the closer proximity to colleagues in orthopedics will enhance the ongoing research collaborations between the two areas. "We deal with very related things. When we're neighbors, it will be easier to consult back and forth," Block says.

COMMUNICATION DISORDERS AND SCIENCES

The Section of Communication Disorders and Sciences (CDS) treats problems with speech, language, voice, swallowing, hearing and balance. Its outpatient services, which currently are provided in both the Professional and Senn buildings, will be consolidated in the Orthopedic Building. Senn is one of the oldest buildings on campus and is slated for demolition in the future as part of the Rush Transformation. The offices of the Department of Communicative Disorders and Sciences, an academic unit of Rush University, will remain in the Armour Academic Center.

"Clinical services will be more efficient and the patient experience will be improved in the new space," says Dianne Meyer, PhD, associate professor and chairperson of communication disorders and sciences. "Patients will enjoy greater comfort, and all of their audiology and speech-language services will be provided in a single location."

As with rheumatology, the new location also will make room for CDS' growth. "We've had to limit some of our case loads because of lack of space. The new location will allow us to accommodate more patients," Meyer says.

CDS will have new areas in the Orthopedic Building for demonstrating hearing assistance devices and for educating patients



about treatments and technologies; increased space for working with patients; and observation rooms that will enable parents or spouses to observe treatments and learn how to provide therapy at home.

"We're really pleased to be moving to a brand new space that has been designed to accommodate the kinds of services that we already provide and allows us to expand and provide additional services that are needed," Meyer says.

OTOLARYNGOLOGY – HEAD AND NECK SURGERY

The Department of Otolaryngology – Head and Neck Surgery cares for patients with diseases of the ear, nose, sinuses, larynx and upper respiratory tract as well as the head and neck, tracheobronchial tree and esophagus. The move into the Orthopedic Building will unite the department's academic offices, now in the Senn Building, and clinical practices, currently in several locations in the Professional Building.

The department's new, state-of-the-art exam rooms will include advanced equipment for training residents, such as microscopes with video capabilities. The temporal bone lab, where residents learn temporal bone

surgical techniques, also will be housed in the Orthopedic Building.

"Bringing our academic and clinical areas together will provide more clinic space for resident education and allow for immediate collaboration between various department members subspecializing in either ear disease, head and neck cancer or nasal sinus disease," says David Caldarelli, MD, Stanton A. Friedberg, MD, Professor.

In addition, the department's new facilities will include more examination rooms, two new patient consultation rooms and a new dedicated room for performing medical procedures. As a result, patients will be seen more quickly and receive any tests they need in the offices where they receive their exam, rather than having to go to another building.

Otolaryngology's location adjacent to CDS also will make care more convenient for the many patients who receive services from both departments. "We are constantly referring patients from otolaryngology to be evaluated by speech and hearing, and audiology," Caldarelli says. "Now it's just a matter of them walking across the hallway, because we'll all be on the fifth floor together."

News Briefs

FREE COMMUNITY EVENTS

Rush University Medical Center offers an ongoing series of free community events led by experts at Rush. Registration is requested for most events. To register, please call the Rush physician referral service at ext. 2-5555 or (888) 352-RUSH (7874).

Effective Management of Inflammatory Bowel Disease

Wednesday, June 2, 6 to 8 p.m.
Armour Academic Center, room 994

Do you have Crohn's disease or ulcerative colitis? Are you interested in learning about the latest research and how to effectively manage your inflammatory bowel disease (IBD)? Join the medical experts from the Inflammatory Bowel Disease Program at Rush to expand your knowledge about IBD, including the latest treatments, coping and how to develop an effective relationship with your medical provider. This event will include the following topics and speakers:

- Causes and Symptoms of Inflammatory Bowel Disease – Ece Mutlu, MD, gastroenterologist
- Update on Treatments for Crohn's and Ulcerative Colitis – Garth Swanson, MD, gastroenterologist
- Effective Coping Techniques for Patients with IBD – Sharon Jedel, PsyD, gastrointestinal psychologist
- The Importance of Communicating With Your Medical Team – Courtney Iwersen, RN, BSN, and Jessica Sison, RN, BSN, IBD nurses

Spine and Back Treatments

Tuesday, June 15, 6 to 8 p.m.
Armour Academic Center, room 994

Speakers: Vincent Traynelis, MD, neurological spine surgeon, and Kern Singh, MD, orthopedic spine surgeon.

IBD Clinic at Rush to Offer Quick Care for Patients

The Division of Digestive Disease is pleased to announce that the Inflammatory Bowel Disease (IBD) Clinic at Rush is available to provide follow-up care to patients discharged from the hospital who have been newly diagnosed with IBD or who do not have an IBD physician.

Composed of a multidisciplinary team of specialists, including gastroenterologists, a dietitian and a psychologist, the IBD clinic offers patients the latest in the clinical care and new treatments for IBD. To learn more about the program, services and clinical trials, please visit www.rush.edu/ibd.

All patients referred to the clinic will be seen **within one week**. To refer a patient to our clinic for follow-up care, please call the IBD hotline at (312) 942-1414.

RUSH'S SMALLEST PATIENTS GET IN THE OLYMPIC SPIRIT

The Neonatal Intensive Care Unit (NICU) at Rush celebrated the winter Olympics in February. The unit was decorated with red, white and blue colors as well as gold, silver and bronze medals. The NICU's babies joined in on the fun by wearing red, white and blue U.S.A. hats. A local women's group from Glen Ellyn knitted the Olympic-themed hats for the tiny babies. The NICU frequently receives hats, booties and blankets from various organizations throughout the year. This winter was just a bit more special.



Spring into Better Health:

ADOPT SIMPLE HABITS TO ACHIEVE BIG CHANGES

An old Chinese proverb says, "It is better to take many small steps in the right direction than to make a great leap forward only to stumble backward." This idea certainly is true when it comes to making changes for a healthier lifestyle. People must identify and develop simple habits of healthy behavior in order to achieve the big changes they wish to see in their life. Whether the goal is to quit smoking, lose 100 pounds, run a marathon, or live long enough to be a grandparent, all of these aspirations begin with small steps.

Spring is a time of new beginnings, so the Rush Department of Food and Nutrition Services encourages you to adopt some of the simple, easy habits below to spring into better health this season.

Drink a calorie-free beverage in place of juice or soda pop each day

Juices and soda pop are equal in terms of sugar content and calories. By exchanging one or more servings of these calorie-filled drinks for calorie-free beverages, such as water, diet soda pop or diet juice, you easily will remove a source of added sugar and calories.

Take a walk

According to research done by the American Association of Retired Persons, walking can reduce your risk of heart attack, stroke, certain cancers and diabetes. It also will

lower your blood pressure and boost your good cholesterol and your mood. Even if you exercise daily, take a break during your day to take a brisk walk outside, or around your home or office. A quick 10- to 30-minute walk will benefit your body and mind.

Eat your fruits and vegetables

The federal Center for Nutrition Policy and Promotion's Dietary Guidelines for Americans recommend five to 13 servings of fruits and vegetables per day. This amount may sound daunting, since the average American consumes only two or three servings of fruits and vegetables per day, but remember, the goal is to begin with small steps. Simply add a whole fruit and/or a nonstarchy vegetable to each meal and you'll be eating twice the amount of these healthy foods than the average American. For example, have fruit on your breakfast cereal and choose fruit for dessert after lunch and dinner instead of sweets, and have a salad with lunch and a steamed vegetable with dinner to meet your goal.

Stretch

Have you ever watched your cat or dog after they get up from a short nap? Stretching is an activity that most animals do naturally; however humans tend to be so busy during the day that they ignore stretching, and by the evening their muscles are in giant knots. Take one or two minutes every few hours to loosen up your back, neck, hips and ankles to improve blood flow and prevent all-too-common aches and pains. You can find simple stretches by visiting www.webmd.com and searching for "stretching exercises at your desk."

For more information about any of the tips mentioned above, or for expert nutrition and fitness advice, please call (312) 942-DIET (3438) to schedule an appointment with one of Rush's registered dietitians.



RUSH PATIENT EXPRESSES GRATITUDE IN SONG

Dick Haughey was so impressed with his care at Rush that he wrote a song about it with his wife, Carol, called "Rush Angels."

"I really had strong feelings about the people down there," Haughey says. "They went overboard for me — they were really good to me."

Haughey was diagnosed at another hospital with incurable stomach cancer that had spread to his lungs. When he got a second opinion at Rush, doctors found two curable cancers instead. Currently, Haughey meets with his oncologist, Gerry Bohac, MD, on a regular basis for follow-up tests to make sure the cancer hasn't returned. His experience is featured in one of Rush's new

television commercials, as is part of the song, an unexpected component that he offered up on his own. The essence of Haughey's experience and feelings about Rush are perhaps best summed up in this line from his song: "When I needed them the most I was guided down to Rush, where I met those angels of mine."

"I thought I was at the end of my life, and they really gave me hope," he says. "I guess you can tell by the song. It came from my heart."

To hear Haughey's song and to read more about his story, visit the Rush InPerson blog at rushinperson.rush.edu, then search "Rush Angels."



NEWSrounds

GAIL L. WARDEN EMPLOYEE OF THE YEAR AWARD

Shira Miller Calms Young Patients and Families With Warmth and Understanding

Undergoing a computed tomography scan or magnetic resonance imaging (MRI) can be overwhelming and frightening for children and their parents. Shira Miller, child life specialist in the Department of Diagnostic Radiology and Nuclear Medicine, helps to change that.

She prepares children for radiology procedures, working to eliminate the fear and confusion they or their parents may have about these screenings.

Miller explains the process ahead of time and uses relaxation or diversionary techniques to help the child through the procedure. A typical example of her approach is the way she calmed a 6-year-old girl who was scheduled for an MRI under anesthesia, who was terrified of the anesthesia mask and refused to change into her hospital pajamas.

"We played with the mask for about 30 minutes, doing things like blowing towers of blocks over with it and blowing bubbles through it, until she was finally comfortable enough to put it on her own face," Miller recalls. "We then had her choose pajamas in the color she wanted. She went into the anesthesia induction room and breathed in the mask with no problem."

Through her efforts and dedication, Miller has built a program that has had a positive effect on patient and parent satisfaction. For example, one parent praises Miller's work with her young daughter, who underwent an ultrasound and a spinal MRI on two separate days. Miller worked with the child before both procedures, sitting alongside the girl on the floor of the radiology waiting area to gain the confidence of the child and her parents.

"She made the ultrasound seem almost like a fun experience,"

explains the mother. "When it was time for the MRI, she again explained the procedure in a very understanding way, using a doll, mask and picture. My daughter named one of her dolls after Shira."

Technologists and radiologists have come to depend upon Miller's ability to keep children calm while allowing them to produce quality images with minimal need for sedation during procedures. "Shira is an integral member of our radiology team. She collaborates with radiologists and technicians; is accountable for the child life activities within the department; and is respectful to all who are involved in the care process, while exemplifying excellence in the way she performs her job," says Bernie Peculis, MS, administrative director, diagnostic radiology.

Ultrasound technician Gosia Bigos echoes Peculis' sentiments. "She pays specific attention to each patient and gives us professional advice about how to deal



Shira Miller, MS, CCLS

with them depending on their history or problem," Bigos says.

"Miller came to this position naturally, having always worked with children. She learned about the field of child life specialists from a friend in college whose sister was hospitalized," she says.

For Miller, the most rewarding part of her job is help-

ing empower children and families in their health care experiences. "The best feeling is teaching a child and family about how a procedure is going to go; helping them have a plan and coping strategies; and then having them go into the procedure without me, and hearing afterward how successful the child was," Miller explains.

WAYNE M. LERNER MANAGER OF THE YEAR AWARD

A Manager's Commitment to Excellence Motivates Those Around Her



Traci Colvin, MPH

As the research study manager for the Rush Alzheimer's Disease Center (RADC), Traci Colvin oversees the center's two largest epidemiological studies – the Religious Orders Study and the Memory and Aging Project. Each study includes more than 1,100 participants, who are evaluated annually until death and donate their organs afterward.

Colvin is on call 24 hours a day to ensure that autopsies are performed promptly after death, which often means being on the phone with the patient's family, the funeral home and the hospital, frequently in the middle of the night for several hours. This commitment is just one of the many reasons why Colvin's staff nominated her for the Manager of the Year Award.

"Much of our success can be attributed directly to her leadership and character," says Tracy Faulkner, RADC department manager.

Colvin's staff is a diverse group of 26 people, made up of research

study coordinators, project coordinators, nurses, phlebotomists and research assistants. Most of these staff members work in teams off site for days at a time, sometimes out of state, collecting research data on participants. In order for them to be successful, they must work well together.

Colvin holds monthly staff meetings to foster her team's collaboration and to recognize the accomplishments of her staff. During these meetings, she allows time for staff members to stand up and recognize others for their outstanding demonstration of the I CARE values – called "Way to Go" awards. She encourages each team member to succeed on his or her own. But more important, she's created a cohesive team, and a team that respects her. Last summer, her staff held a surprise party in her honor to show how much they appreciated her.

George Hoganson, research study coordinator, RADC, has worked

with Colvin on the Religious Orders Study and Memory and Aging Project for several years. "She takes the time to understand and appreciate the unique skills and talents of each and every employee," he says. "In doing so she allows those around her to unleash their talents, to achieve both professional and personal success, all the while serving to advance the mission of the RADC."

"She emanates a warmth that makes her approachable as a manager," Faulkner continues. "Her staff members feel comfortable coming to her with both work and personal issues, and she listens, offering comfort, advice, direction, empathy or just an ear."

"I really enjoy my job and the people I work with," Colvin says. "Our center is more like a family than a department. We do great work here, and I'm just glad to be a part of it."

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NEWSrounds

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Editor
Anne Burgeson

Managing Editor
Nancy Di Fiore

Contributors
Judy Germany, Elizabeth Higgins and
Kevin McKeough

Designer
Kristen Marzejon

Photographers
Steve Gadowski, Leo Garcia and
Bill Richert

Have a news item or story idea for
NewsRounds? Contact the editor at:
Phone: 942-5582
Fax: 563-4149
E-mail: anne_burgeson@rush.edu

Marketing and Communications
Triangle Office Building
1700 W. Van Buren St., Suite 456
Chicago, IL 60612



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BRADLEY G. HINRICHS TEAM OF THE YEAR AWARD
Nurses Collaborate to Keep Transplant Program
on Successful Track

When several nurse coordinators left the kidney transplant program late last year, the other nurse coordinators in the program either took on new duties, worked extra days, assumed an increased patient load or otherwise restructured their work to ensure that the many patients seeking kidney transplants at Rush continued to receive high-quality care.

In recognition of their dedication and hard work, the Rush kidney transplant nurse coordinators team received the Team of the Year Award.

Pretransplant nurse coordinators play an integral role in the transplant process, serving as the initial contact between the patient and the transplant program. These coordinators screen patients with end-stage kidney disease to identify viable candidates for kidney transplantation. They also work closely with transplant surgeons and nephrologists to provide consistent quality care as patients progress through the referral, evaluation, and pretransplant management and listing processes.

The pretransplant nurse coordinators currently are responsible for 454 patients who are awaiting a kidney transplant at Rush and another 400 other patients who are undergoing medical evaluations in

order to be put on the waiting list for transplant.

Posttransplant nurse coordinators are equally important, managing and coordinating the care of more than 300 posttransplant patients each month. Their relationship with the patient begins immediately following transplant — they are part of the multidisciplinary clinical team that makes rounds to see the transplant patients in the hospital, and they provide transplant education before patients are discharged.

When their colleagues left the program, two posttransplant nurses quickly adapted their schedules to accommodate the demands of the prekidney transplant clinic. Elizabeth Myers, RN, and Heather Clark, RN, jumped into their new roles, observing the departing nurses before they left Rush and asking them a lot of questions.

Myers and Clark worked closely with Maria Sieczka, RN, the remaining prekidney transplant coordinator, who was instrumental in their training. During the transition, Sieczka increased her patient load and on-call responsibilities to ensure the success of transplanting appropriate candidates.

The nurses brainstormed with management about ways to use internal resources to fulfill prekidney transplant nursing roles. As Myers and Clark transitioned to their new

positions, Linda Murphy, RN, a pre-kidney transplant nurse coordinator, volunteered to add two more days to her schedule to help see initial patients seeking transplant. Pre-kidney transplant nurse coordinators Theresa Partida-Aguirre, RN, Husai Kelliher, RN, Sarah Muench, RN, Pamela Rohde, RN, Lena Christudhas, RN, Jennifer Gilsdorf, RN, and Damaris Echevarria, RN, began restructuring to maintain quality of care to the posttransplant patients. In addition, Richard Reyes, living donor coordinator, collaborated with the nurse coordinators during clinics to expedite the patient flow.

In addition, the four other nurses in the University Transplant Program were instrumental in helping the kidney transplant program maintain its commitment to patient care. They include Linda Luevano, RN, vascular access nurse coordinator and liver transplant coordinators Walter Johnson, RN, Krystyna Cieczak, RN, and Linette Edmond, RN.

“It has been a great experience witnessing the kidney transplant coordinators’ collaboration and their contributions to meeting the transplant program’s needs,” says Mary Hellmich, BSN, RN, clinical nurse manager, abdominal transplant. “They are truly an exceptional, professional and dedicated team of nurses who have successfully transformed a challenging situation.”



Seated (left to right): Theresa Partida-Aguirre, RN, Husai Kelliher, RN, and Damaris Echevarria, RN. Standing (left to right): Brad Hinrichs, MBA, Elizabeth Myers, RN, Linda Murphy, Sarah Papadopoulos, RN, BSN, Maria Sieczka, RN, Mary Hellmich, BSN, RN, and J. Robert Clapp, Jr., FACHE.

JAMES A. CAMPBELL, MD, DISTINGUISHED SERVICE AWARD

Roles Change, Commitment to Excellence Remains Constant

In the 34 years she’s worked at Rush, Cathy Bishop, laboratory manager, Department of Pathology, has helped design medical testing laboratories, supervised the installation of a new computer system, developed a customer service unit within her department and helped lead Rush’s diversity initiatives.

In recognition of her many contributions and strong focus on patient care, Bishop received this year’s James A. Campbell, MD, Distinguished Service Award. The award is named for the first president and CEO of Rush-Presbyterian-St. Luke’s Medical Center, (which changed its name to Rush University Medical Center in 2003). The Campbell award recognizes Rush employees for excellence in leadership and dedicated service to the Medical Center and our patients.

“Cathy really focuses on doing the right thing and getting the job done correctly,” says Robert DeCresce, MD, chairperson of the Department of Pathology and president of the medical staff. “When you need something done you can count on her. She’s available anytime. There’s no such thing as off hours for Cathy.”

Bishop received a Bachelor of Science degree in medical

technology from Rush University in 1976, then began working for the Medical Center in pathology as a medical technologist in the immunology lab, becoming the laboratory supervisor in 1981 and laboratory manager the following year.

Since then, her experience has ranged widely and her responsibilities have increased steadily. She moved from the immunology team to managing the phlebotomy lab and the computer order entry staff, then volunteered to manage the laboratory information system (LIS). Under Bishop’s leadership, the LIS group switched its focus from being a self-contained computer group to a service area that treated the pathology labs as customers. “The climate changed from being very restrictive to being much more supportive,” she says.

She applied that same outlook to the Department of Pathology as a whole in the mid-90s, when Bishop established a customer service area in the department. “It’s a staff that answers customer phone calls and meets with our clients, the clinical departments and physician offices at Rush, and informs them about procedures related to the laboratory,” she explains. “We also get their feedback about how we can further improve our services.”

After becoming the manager of the anatomic and surgical pathology lab in 2002, she took on another big project, managing the installa-

tion of a new computer system for the department. Bishop stressed collaboration during the nine-month project. “We met with the doctors in the department and went over report formats with them and how they wanted to view their cases. We also had a lot of interaction with the laboratory staff in developing the system,” she says.

Since 2006, Bishop has managed the core laboratory, the microbiology laboratory, the phlebotomy team, Rush’s four outpatient laboratories and her department’s computer systems. She now oversees a staff of about 150 people. “I’m very concerned about patient care and the quality of the laboratory testing that we do here. There’s no room for error or delays in getting results to the physicians,” she says.

She’s also helped design a new outpatient lab for the Professional Building, which will be built after completion of the East Tower. Bishop, who previously worked on the design of the outpatient lab in the Triangle Office Building, led members of the pathology staff in collaborating with colleagues in Rush’s finance and information services departments on the project.

In addition to her work in pathology, she serves on numerous committees, including the Operational Policy and Procedure



Cathy Bishop, MT (ASCP), SI

Committee, which she co-chairs. She also serves as administrator on call for the Medical Center. She is a sponsoring supervisor in Rush’s diversity peer learning pilot project, which aims to help staff overcome differences and better understand each other’s point of view.

“Embracing diversity goes hand in hand with embracing Rush’s I CARE values,” Bishop says. “To have teamwork, it’s important to understand that the people you’re

working with may be different from you and to appreciate those differences.”

She believes the emphasis on the I CARE values (innovation, collaboration, accountability, respect and excellence) have led to a culture shift at Rush. “I really have been excited about what Rush stands for these days,” Bishop says. “It’s a wonderful place for patient care, it’s a great place to work where employees are treated fairly.”

PATIENT SATISFACTION “STAR”

The Emergency Room Patient Experience —
An Employee Who Is Committed to Meeting the Needs of Our Patients



Sabina Kuduzovic

Patients and their families often comment that Rush offers a patient-friendly and service-oriented environment. Even as they face illness and fear of the unknown, many of our patients take the time to praise our efforts because of the excellent care they receive at Rush.

Every quarter, an employee whose name appears in two or more favorable patient evaluations is awarded the Patient Satisfaction “Star” Award. Over the past year, more than 20 members of the Rush community have received a Patient Satisfaction Star Award. From this group, Sabina Kuduzovic, x-ray technician, Department

of Emergency Medicine, was chosen to receive the Patient Satisfaction Star Award for 2010 for showing sensitivity and compassion during stressful times for her patients.

“My work comes naturally to me. I love what I do,” says Kuduzovic, who often works double shifts.

Kuduzovic’s excellent communication skills and perceptive nature help her to anticipate the needs of her patients as she prepares them for tests in diagnostic radiology.

Patients typically are frightened and in pain while waiting in the emergency room, but Kuduzovic helps put her patients at ease by making them more comfortable. One patient remarked that she showed extraordinary sensi-

tivity by getting a pair of cloth booties and a warm blanket for the patient in case she was cold.

“In my 25 years of experience, Sabina stands out as one of the best. Over the five years that she’s worked here at Rush, she has shown a genuine compassion for patients while ensuring that they receive outstanding service in the emergency room,” says Bryan Latham, MBA, manager of diagnostic radiology. “She treats everyone the way she would want to be treated and helps patients, many of whom are in a lot of pain, position for the best possible images.”

“She truly enjoys being in the emergency room,” Latham continues. “She has a wonderful attitude — she is a true example of service with a smile.”

HENRY P. RUSSE, MD, HUMANITARIAN AWARD

Volunteer Work in Dominican Republic
Opens the Door for Haitian Relief Mission

When a massive earthquake struck Haiti on Jan. 12, Stephanie Wang, MD, medical director of Rush University Internists, was in a unique position to help. For the past five years, Wang has organized and led physicians and students at Rush on volunteer medical missions to the Dominican Republic, which shares a border with Haiti on the Caribbean island of Hispanola.

Wang led a team of 18 volunteers from Rush, who traveled to Haiti via the Dominican Republic in late January. The team spent 10 days providing medical care in Port-au-Prince, Haiti’s earthquake-devastated capital.

In recognition of both her life-saving work in Haiti and her ongoing service in the Dominican Republic, Wang received this year’s Henry P. Russe, MD, Humanitarian Award. The award honors the memory and humanitarian efforts of its namesake — the dean of Rush Medical College and vice president of medical affairs from 1981 to his death in 1991 — and is given to members of the Rush staff who demonstrate an ongoing commitment to the well-being of others in their work.

“She is a selfless individual who thinks only of others and giving back,” says David Ansell, MD, MPH, vice president for clinical affairs and chief medical officer, who was part of the Wang-led volunteer team to

Haiti and who also has taken part in some of the Dominican Republic missions. “When you do this kind of work you realize how blessed we are to have what we have, and to be able to give our patients what we have as far as our skills and resources. That’s what drives the passion that Stephanie has.”

Wang’s relationships in the Dominican Republic enabled her team to get to Haiti when others couldn’t, because the earthquake had left the airport in Port-au-Prince inoperable. “We had the contacts and the knowledge of the terrain and the means to maneuver,” she says.

The team flew into Santo Domingo, the Dominican capital, then traveled in a bus for hours over dirt roads to reach Port-au-Prince. During the team’s stay, they treated more than a thousand patients suffering from fractures, wounds, infections, and even heart and kidney failure.

Physicians on the team also performed 30 to 50 surgeries daily and organized an intensive care unit in the tent hospital on the grounds of General Hospital, Port-au-Prince’s main hospital. “We wanted to make sure that future teams coming to Haiti would have better conditions than what we found when we got there,” Wang says.

Those subsequent teams have included other members of the Rush community. As of mid-June, seven groups totaling more than 50 clinicians from Rush have volunteered in Haiti. The teams have expanded their

scope, working with communities outside Port-au-Prince and looking for places where Rush volunteers can maintain a long-term presence to help the community develop its health care capabilities.

Wang’s work in Peralta, a village of 20,000 people in a remote rural area in the Dominican Republic, provides an example of such an ongoing, developmental effort. Part of the goal is to help Peralta develop a self-sustaining health system.

Her work also has an educational purpose, providing Rush residents and students with an exposure to tropical medicine. In addition to her administrative and patient care responsibilities at Rush University Internists, Wang is the associate director of Rush’s residency program in internal medicine. She trained in the program herself and received her medical degree from Rush Medical College.

“Having trained at Rush, I have reaped the benefits of great teaching and role-modeling,” Wang says. “However, there were no opportunities available at the time for international medical service. This program has helped provide such an opportunity for the current generation of Rush students and residents.”

The Dominican missions have taken place four times a year since 1995. Wang and other volunteers have flown to Santa Dominica, then made the three-hour drive



Stephanie Wang, MD

west to Peralta. They stay one to two weeks, providing primary care in Peralta and traveling into the surrounding mountains to deliver the three-month supply of medications they’ve brought for residents of the outlying communities who are unable to come to the village. Members of the team also perform general, reconstructive, urological, and ear, nose and throat surgeries, and have completed about 400 procedures to date.

Along with direct care, the teams train community health promoters to provide primary health care in the area. “We’re starting to see measurable improvements there,” Wang says. “We’ve been able to help establish public health systems by teaching the health promoters about basic health

processes and to help the village set up a water purification plant run out of the clinic.”

Just as her teams are building Peralta’s health care capacity, Wang is building the abilities of her Rush colleagues. Jennifer Tobin, MD, internal medicine, now leads her own team on one of the quarterly missions.

Even though Wang is no longer traveling to the Dominican Republic four times a year, coordinating the missions remains a major time commitment to undertake on top of her other duties. “Obviously, this is something I believe in, and gives me a lot of energy,” she says. “I’m a doctor, and this is where my skills are. It’s part of the social contract. You’re expected to contribute what you have the capability of contributing.”

Concern For Patients Drives 54 Years of Dedicated Service



Voncile Williams

Voncile Williams, who worked as a night administrator for 37 of her 54 years at Rush, often spent her mornings at Rush listening to fellow employees tell her to go home. That’s because she usually stayed long past the end of her shift at 7:30 a.m., following up with other staff members about the previous evening’s events and making sure the patients she’d had contact with had everything they needed.

The word committed doesn’t begin to describe Williams’

dedication to her job and to Rush. A past recipient of Rush’s James A. Campbell Award for Distinguished Service, she retired this past February. Larry Goodman, MD, President and CEO of Rush, paid tribute to her long service to the Medical Center when she attended this year’s Founders Day dinner.

Williams began working at Rush in 1955 as a nurses aide and held positions as unit clerk, assistant to the head nurse, unit manger and area

director before becoming night administrator in 1973. She was responsible for the Medical Center’s overnight operations but also frequently assisted patients, like the time she personally got a wheelchair for a woman about to give birth and brought the woman to labor and delivery herself.

“She was always willing to go the extra mile to make sure that patients and their families were satisfied,” says Reginald McKinnie, manager

of administration on call, who worked with Williams for 18 years. “She wanted to make sure that anyone who came to the Medical Center left with a great impression.”

“I used to tell everybody, don’t ever let me hear you say ‘that’s not my job.’ We’re all here for the patients,” Williams remembers. “I did a lot of things in areas I was not assigned to do, because we’re all assigned to work together. When we do, everything turns out better.”

ALICE B. SACHS MEMORIAL AWARD

Three Nurses Exemplify Compassionate Care at Rush

It is a testament to the high level of compassion that guides care at the Medical Center that this year, three members of the Rush community were chosen as recipients of the Alice B. Sachs Award. The award is given each year in recognition of exceptional acts of kindness to Rush patients and their families. John Sachs, DDS, a member of the Rush Board of Trustees, and his wife, Lois, established the award in 1982 in memory of his mother, a former Rush patient.

This year’s recipients of the Sachs award are Tanya Melich-Munyan, RN, community/public health supervisor, Faculty Practice Services, College of Nursing; Katie Richards, RN, clinical nurse 2, Surgical Intensive Care Unit; and Sunayna Sharma, RN, general medicine. In their unique ways, each of them embodies a dedication to Rush’s mission to provide the very best care for our patients.

PERSONAL EXPERIENCE DRIVES COMMITMENT TO CARING

Tanya Melich-Munyan, BSN, RN, is part of Faculty Practice and Outreach, a program that arranges for nurses at Rush to provide services to other organizations. “It puts high-quality nurses in the community at a very reasonable rate and also provides students in the nursing program with unique clinical opportunities,” she explains.

Since 2006, Melich-Munyan has worked at the Chicago Lighthouse for People Who Are Blind or Visually Impaired, a comprehensive social service agency. Her official responsibility is to provide nursing care and health education to the children in Chicago Lighthouse’s school, who are visually impaired and have other developmental disabilities, but her role has expanded to include adults throughout the entire organization.

The work she does also extends far beyond her formal duties. On her own

time, Melich-Munyan has visited hospitalized students, served as a family advocate, and looked after students and their siblings when their parents couldn’t arrange child care.

Melich-Munyan also has bought groceries for the financially strapped families of some of her students and arranged for them to receive donations from area food pantries. She promotes healthy eating by bringing students and staff members fruits and vegetables from her garden and cooking meals for them every three months, and also helps tend the school’s garden.

“Tanya represents the Rush I CARE values by going well above and beyond all expectations. She is an exceptionally motivated person and does her work with great enthusiasm,” says her supervisor Marilyn Wideman, DNP, RN-BC, director, faculty practice and outreach.

Melich-Munyan says she’s motivated by her own experience with disability. While serving as a corpsman (i.e., a field nurse) in the U.S. Navy in the mid-90s, she became sick with a neurological condition that affected her gastrointestinal system, ultimately requiring multiple surgeries that removed most of her digestive tract.

She spent months in the hospital. “I was 100 percent well and healthy, and all of a sudden I was completely dependent on everyone else,” she says.

Once she recovered, Melich-Munyan earned a degree in public health and worked for five years in pharmaceutical research before earning her Bachelor of Science in nursing from Rush University and beginning her work at Chicago Lighthouse.

“So many people have given so much to me, and the way I live my life is to



Tanya Melich-Munyan, BSN, RN

give something back,” she says. “Rush really supports me to do that, and I feel I can pay back the college and the Medical Center by paying it forward.”

DEVOTED FRIENDSHIP BRINGS PATIENT BACK FROM BRINK

Katie Richards, RN, befriended a patient in the Surgical Intensive Care Unit (SICU) who had developed multiple post-surgical complications that left her on a ventilator, unable to speak, and made it necessary to amputate her toes.

“The patient became depressed, and we knew if we didn’t get her spirits up, she’d never make it out of here,” says Ann Lough, RN, clinical nurse coordinator, SICU.

Richards decorated the patient’s room with stuffed animals and other items,

painted her fingernails and brought in movies for her to watch. She spent as much time as she could keeping the patient company. “She didn’t want to be alone; that was her biggest thing,” Richards says.

Thanks in part to Richards literally nursing her back to health, the patient improved and eventually left the hospital. She now is in a rehabilitation facility, off her ventilator, talking and learning to walk again.

A native of the Detroit area, Richards came to work at Rush immediately

after earning her Bachelor of Science in nursing degree from the University of Michigan in 2007. “She is a very caring and kind and responsive individual,” Lough says. “Katie always has a smile on her face, always has a kind word for the patients and the staff. She cares about the patients and their families, and you can see that in her daily communication with them.”

“I treat my patients and their families how I would want to be treated in that situation and how I’d expect someone to treat me if a member of my family were in the hospital,” Richards says.



Katie Richards, RN

CARING ATTENTION PUTS PATIENTS AT EASE

Sunayna Sharma, RN, is a great listener. “She gives you 100 percent of her attention. You can tell from the way she speaks to you and the way she makes direct eye contact with you. Sunayna presents a demeanor in which she doesn’t seem to have anything else on her mind, even though she is multitasking all day long. It gives patients immense comfort and trust in her,” says Julie Lopez, DNP, RN, unit director, general medicine.

Sharma’s attentive, patient-centered approach was evident in the way

she worked with a patient and her husband, who were upset about her impending discharge from the hospital. “She had pain control and medication issues, and there was anxiety around that,” Sharma says. “They didn’t feel ready, and they were upset.”

She arranged for the attending physician and resident who had treated the patient and a hospital administrator to meet with the couple and review the situation. “I felt that if all the issues were laid out for her, she would feel better about going home,” Sharma explains.

After the meeting, the couple agreed to the discharge.

Born in India, Sharma grew up in Windsor, Ontario, just across from Detroit on the U.S.-Canada border, and earned her nursing degree from the University of Windsor in 2004. She came to Rush in 2007.

“I approach each patient as an individual, not a room number,” she says. “Whenever I start my day, I think about how I can make this day a little less stressful for them. I try to make sure they’re calm and do anything I can to make their day a little happier.”



Sunayna Sharma, RN

Employee Anniversaries

Each year, Founders Day honors the people who first established Rush University Medical Center as Rush Medical College in 1837 as well as the people who make Rush one of the leading academic medical centers in the city and across the country. The following pages list Rush employees who are marking milestone anniversaries at the Medical Center this year. Rush thanks each of you, and all our staff, for your commitment to the Medical Center and to providing the best possible care for our patients. Each of you plays an important part in Rush’s proud history and its exciting future. Congratulations to all of you.

5 YEARS

Adrienne Adams
Angela T. Adduci
Iram Ahmad
Michelle B. Alexander
Matilda Alickolli
Jannie Allen
Rosalinda Alvarado
Francisco R. Angulo
David A. Ansell
Sarah Anzevino
Roselyn Aranas
Debra Arendziak
Lisa J. Arneson
Jonathan E. Arrington
Marsha T. Ash
Martha Avila
Vernalou A. Badillo
Shijuana K. Baker
Dimitar Baltadjiev
Tristan S. Banks
John M. Barcenas
Debra S. Barner
Gem P. Begolli
Nicole B. Bellomo
Catherine L. Berends
Gay L. Bergeron
Linda M. Betancourt
Malgorzata Bigos
Latasha M. Blake
Daniel P. Boffa
Jessica Botan
Patricia A. Boyle
Aimee E. Brasher
Raquel Bridges
Cassandra Brooks
Travis Brooks
Ada N. Brown
Marvis L. Brown
Tasha M. Brown
Vernon E. Brown
Anne Brusius
Jamie M. Bucuresteanu
Katherine Bueschel
Colleen M. Buhrfiend
Teresa M. Burdi
Heather Burke
Erica Burnett
Cathleen A. Byrne
Richard Byrne
Celeste H. Calabro
Beverly A. Cameron
April Camp
Andrea L. Canada
Rahnard A. Carter
Demetra C. Castillo
Jeralynne R. Cecilio
Shameka Chambers
Julie Chaplin
Elaine Chen
Paulette Christmas
Martha E. Christy
Sarah L. Ciemny
James R. Clapp Jr.
Katherine E. Clavey
Amanda L. Cockrell

Patricia S. Cohen
Stephanie A. Colasacco
Quantas Q. Coleman
Beatrice Concepcion
Leo Correa
William Cortes
Yesenia Cortez
Jason T. Cotham
Travon Crawford
Keith J. Crutchfield
Jennifer T. Cruz
Patricia S. Cruz
Martha I. Curiel
Emily K. Czuba
Carrie F. Daly
Melany M. Danehy
Erica Ann Danos
Melissa L. Daverin
Robert T.L. Davison
Antonio Demarco
Emily N. Dittle
Gary C. Dixon
Sharnetta M. Dodson
Tara D. Doman
XinQi Dong
Ripple R. Doshi
Alethia M. Drewniak
Kerry C. Dunne
Julie Durbin
Anna M. Duszynski
Erin Emery
Phillip A. Engen
Comedia L. English
Janet L. Engstrom
Mary Ann Enriquez
Ginnette C. Espino
Jacqueline Estrada
Lateah N. Evans
Cheryl A. Evers
Gena P. Faas
Angela M. Ferguson
Michael Fill
Sarah Finnegan
Tracy M. Fisher
Kharma C. Foucher
Maricruz Franco
Lauren M. Franker
Dawn M. Franks
Jun Fu
Henry C. Fung
Christine J. Gabrielse
Ivelisse Garcia
Robert H. Garrette
Dionisio G. Garza
Marcela Gatica
Kimberly A. Gaydula
David Gerard
Judy G. Germany
Veronica Gheorghiu
Neil Ghodadra
Lindsay L. Gillen
Sahara J. Givens
Gregory Gleyzer
Ann S. Goh
Christina Golner
Edward M. Goodwin

Niraj Gor
Adriana R. Gracia
Tiffany A. Grant
Alicia A. Gray
Robert Gray
Mark A. Green
Gerrie Greene-Dozier
Corey H. Gritsch
Alejandro Gutierrez
Sonia Gutierrez
Valerie Hall
Colleen M. Hallock
Tameko B. Hammond
Ahmed Hassan
Joseph S. Hausfeld
Marianne C. Hayes
Charles L. Hebert
Carla Heffner
Kenya Hemingway
Catherine E. Hermesen
Marvin R. Hernal
Rachel Holler
Marianne K. Holmer
Kathrine A. Huerta
Angela M. Hurley
Lisa M. Hutchison
Ahmed M. Ismail
Raechel R. Issert
Niakisha M. Jackson
Sherri L. Jackson
Diane M. Jakubik
Matthew P. Jaycox
Briana J. Jegier
Ganesha J. Johnson
Jameca D. Johnson
Janice M. Johnson
Marjorie G. Johnson
Ryan E. Johnson
Rita A. Johnston
Devera Jones
Jamie E. Jones
Shontell Jones
Ana Maria Juarez
Nurah S. Karim
Margaret H. Karnick
Inga Karsokaite
Angela R. Keehn
Kathryn S. Keim
Aisha K. Kendrick
Kari A. Kinney
Megan Kissane
Donna M. Kochan
Jennifer M. Kosmala
Soo Y. Kwon
Dorothy F. Lam
Rita V. Lanier
Jason Lawrence
Marc Lazzaro
Srilatha Lazzaro
Jeehyun Lee
Jaclyn M. Legner
Zakkiyya Lewis
Fabiola Loera
Mira Loh-Trivedi
Barbara M. Lopate
Anna A. Lopez
Julie A. Lopez
Vanessa Lopez
Geoffrey A. Lowrey
Karen M. Lukaszewski
My G. Ly
Francisco Magana
Rona Mahor
Paul K. Manuyag
Katherine Marchetti
Bosko Margeta
George-Goce Markovski
Jennise E. Matta
Carolyn A. May
Johanny Mayor
Ronald H. McCracken
Darwanna D. McDonald
Erik M. McIntosh

Alisha L. McIntyre
Anne E. McLaughlin
Octavia L. McCadd
Riley W. McGee
Vernol Y. McKenzie
Gail L. McNally
Hugo A. Mejia
Patricia A. Merriman
Ekim S. Metcalf
Kristi S. Meyer
Harold D. Miller III
Jennifer A. Misasi
Menchu G. Monterola
Carol Montilla
Christine Moore
Marcia S. Moore
Monica A. Moore
Jeanette Moppins
Elisabet Morales
Nicole L. Morales
Elaine Moy
Leonard Mugadili
James Mulshine
Lorenzo Muñoz
Alyson K. Myers
Jonathan A. Myers
Alma Nani
Denise E. Nedza
Daniel R. Negin
Jeffrey S. Neiger
Samuel D. Nelson
Mary B. Newman
Hani P. Nissan
Virginia C. O'Brien
Thomas F. Okrasinski
Paula F. Oldeg
Ciro Olivarez
Samantha J. Olson
Yana Oskin
Lisa E. Oslovich
Mary Ellen Paprocki
Shawn Paris
Daniel K. Park
Jamie E. Parks
Ronald R. Parungao
Sohal K. Patel
Otto Patterson
Kirsten E. Pelka
Iris A. Perez Fuentes
Anibal Perez
Bernice Perez
Courtney M. Perkins
Jonna Peterson
Nathan B. Petts
Dorota Pietrowski
Agnieszka I. Pietrzak
Debra L. Pilolla
Janice A. Pittman
Stephanie R. Pittman
Toni M. Podgorak
Julie A. Podlasik
Aaron J. Potter
Armin Quinonez
Lorena Racey
Nancy L. Radogno
Preeya Raghu
Rosa Ramirez
Josefina Ramos-Franco
Kymia A. Randall
Suresh Babu Rangasamy
Michael Rechitsky
Diana Reyes
Viviana Reyes
Kimberly S. Ricci
Tammie Richardson
Electra Roberson
Angela M. Robinson
Beverly Rodriguez
Arthur H. Roggow
Geraldine E. Romano
Audrey E. Rosenblatt
Dmitry S. Ruban
Erin Rybicki
Julie M. Saibic

Vanessa Saldana
Jennifer L. Sale
Jose J. Salgado
Renjith J. Samuel
Abigail M. Sanchez
Yolanda Sanchez
Elsie Santiago
Noelia Saucedo
Christine V. Schauerte
Karen T. Schneider
Cheryl A. Schumacher
Amar P. Shah
Anand P. Shah
Rachna M. Shah
Shital C. Shah
Lakshmi Sharma
Kathryn R. Shell
David V. Sherman
Jessica H. Sison
Karen M. Skish
Adam P. Smith
Angela L. Smith
Brian T. Smith
Rachel L. Smith
Heather J. Stecklein
Cheryl A. Stoneking
Travis R. Stoub
Nicole M. Strahm
Thomas M. Styx
Sakiko Sugisaki
Jordi Tauler-Vaillet
Frederick L. Taylor
Karen Tessler
Saowaluck Thanungehooshilp
Elizabeth S. Thill
Ann P. Thompson
Johnnay D. Thompson
Caroline J. Thurlow
Lavinia Tiran
Jill Titze
Nancy Torres
Patricia A. K. Torres
Rosie Torres
Amanda Tosto
Maria C. Tovar
Rajeev Tummuru
Julius V. Turian
Jacquelyn Turner
Jennifer L. Tyska
Rowell R. Usman
Frances L. Uy
Ronald A. Uzarski
Richard Valadez
Bonita R. Villar
Rachel M. Viola
Sarah Voll
Ruth Ann Walton
Vincent M. Wang
Yumei Wang
Broderick W. Ward
Shawan M. Washington
Kimberly R. Waterman
Jocelyn B. Weiss
Andrea R. Whedon
Jamira L. White
Marilyn Wideman
Aesha Williams
Cecelia A. Williams
Jeffrey A. Williams
Larry L. Williams
Toyia L. Winfield
Leigh Wolfe
Kisung Woo
Anne Marie Wright
Timothy T. Yau
Patricia L. Yeo
Mark A. Yoder
Michelle A. York
Aaren Young
Camille Young
Kathryn O. Zientara
Monica I. Zinsser
Laura Zuckerman



10 YEARS

Mohammed O. Ali
Lori J. Allen
Ali Cia R. Anderson Campbell
Farahnak Assadi
Monique A. Austin
Rosalba Baca
Tina P. Bailey
Antoaneta J. Balabanov
Coretta Barber-Greenlaw
Theda L. Battle
Maria D. Bautista
Rosanna M. Belardo
Adele F. Benkovitz
Lorie B. Blanchard
Deborah Bradley
Raquel T. Brillante
Retangia L. Brooks
Frederick M. Brown Jr.
Vincent J. Buoncore
Tonya M. Burge
Anne M. Burgeson
Helen J. Burgess
Keturah Burrell
Virginia R. Cabrera
Theodore F. Cantu
Maria J. Castelo
Eva Q. Castillon
Marilyn Cavazos
Domingo Cerda
Markina L. Chambers
Yesenia Chavez
Angela D. Cheeks
Ming Cheng
John T. Cobb
Tanua D. Cole
Scott E. Counts
Vicki R. Counts
Trina M. Cousins
Barbara L. Craig
Ady I. Cruz
James B. Daquiaoag
Camille F. Davis
Jeree Davis
Lisa L. Davis
Rebecca Delarh Deah
Joel Dela Cruz
Jo Bettie Delaney
Denise M. Delaurentis
Janet Irene Dewitt-Goodman
Yvette Renea Dixon
Annette Dowdy
Susie L. Drakes
Pamela Duncan Groszek
Susie Haisun Duroe
Sharon Edwards
Andem E. Ekpenyong
Lydia M. Falbo
Cynthia Fatzinger
Jessie M. Fields
Yolanda Fields
Myra Forbes
Gilbert A. Ford
Ingrid H. Forsberg
Christopher B. Forsyth
Lilibeth B. Franco
Robert Alan Franczek
Barbara J. Franklin
Karri Gaffney
Sandhya Gantla
Christina Garcia
Juanita A. Garcia
Patricia Garcia
Kathleen A. Gast
Kirsten A. Gidd
Sabrina Goings
Jill W. Goldberg
Leon Gordon
Marsha E. Gorens

Alethea R. Griggs
Richard J. Grostern
Kristin A. Gustashaw
Charlotte Y. Hamilton
Tarasia Hamilton
Bonnie A. Hammel
Tiffany L. Hardy
Bianca M. Hare
Gia T. Hayes
Sherry L. Hedge
Melvin G. Higgins
Leroy Hogans
Debra H. Honig
Jennifer L. Hooper
Sharon R. Howard
Da-Mia Humphries
Delphia Humphries
Carolyn Hunt
Stephani R. Hutchinson
Sylbi Intarakumhang
Juan I. Q. Irizarry Sr.
Dororthy J. Jackson
Martha J. Jackson
Passion Jackson
Sheila Rae Jackson
Michelle Jacobs
Jennifer James
Dawn Janjich
Sandra E. Jareczek
Abdul Java
Xin Ji
Amanda M. Johnson
Annette A. Johnson
Latoya L. Johnson
Tyrone Johnson
Annie Jones
Lakesha Jones
Laura Jones
Boris Jozic
Julie H. Jun
Deborah Wallace Keesecker
Alyssa Michelle Kelly
Jisu A. Kim
Aniela Kmetz
Kathleen A. Koelsch
Mary P. Kraus
Gina L. Kring
Melissa M. Lane
Bryan Keith Latham
Elvia L. Leal
Michael A. Lee
Claudia Leon
Zerlecia R. Lewis
Tracie Lindsey
Arleen Lynn Linko
Diane F. LoConte
Susana Q. Loberanes
Petra Lopez-Garcia
John Loster
Jamie M. Love
Mario L. Lucado
Toni R. Macknica
Lashawnda M. Marshall
Teri L. Martin
Terry Martin
Robert J. Maurer
Luther McClain
John H. McClatchy
Laurie A. McMichael
Michele T. Milano
Ernesto Miranda
Alejandro Mireles
Lisa Monaco-Dutkin
Gloria T. Moore
Kathrine K. Moore
Deidre M. Morgan
Giselle S. Mosnaim
Robert L. Moten
Leslie A. Mott
Carol Muehleman

Darlene Muhammad
Candice B. Mulder
Mary C. Mullen
Trinetta L. Nesbitt
Donna S. Nielsen
Jennifer A. O'Donnell
Paul R. O'Drobinak
Cortez M. Olive
Stephanie D. Orr
Antonietta D. Ortiz
Carol A. Pacione
Vergie M. Partee
Kamlesh N. Patel
Minaxi S. Patel
Walter J. Patton
Adriana O. Paz
Aloha Penaflor Venzon
Nancy A. Perejda
Martine L. Phillips
Barbara Piechowska
Jimmie R. Pierce
Scott M. Pierce
Alejandro Pina
Kathleen Piotrowski-Walters
Sheila D. Porter
Yena Prang
Harriet L. Puckett
Tomy U. Puthenpurackal
Peter Pwee
Robert J. Ramirez
Yvonne Ramirez
Maria Rosario Ramos
Lev Rappoport
Marisela Raso
Janet Renteria
Harry M. Richter
Janice Riddle
Charlene L. Rider
Ryan C. Riemenschneider
Andrea C. Robinson
Kimberly Robinson
Tina M. Rock-Noffsinger
Abby S. Roderick
Kiley W. Rodgers
Laura Rogakos
Yasenia Roman
Mary Beth Ross
Metra J. Saddler
Ivor G. Samuel
Chris Sanagustin
Dulce M. Sanchez
Edward P. Sandzimier
Elia Saucedo
Nikesh V. Shah
Raj C. Shah
Jamile M. Shammo
Kennice L. Shaw
Anika N. Shelton
Rebekah S. Shephard
Karla J. Shipp-Johnson
Ann E. Shukla
Shambilyn S. Simpson
Stacy D. Skiadopoulos
Andy G. Slater
James R. Smith Jr.
Dallas A. Smith
Ella M. Smith
Price I. Smith
Robert A. Smith
Hollie M. Sobel
Gerri A. Somerville
Madhu Soni
Tarissa L. Stanciel
Rachel E. Start
John L. Stevenson
John D. Stewart
Kyna S. Stewart
Benita M. Strong
Lisa A. Swanson

Maria Juanita Szczebywlok
Craig Taylor
Allan Raymond S. Tenorio
Linda Testin
Dazireen Thomas
Shenita R. Thomas
Christina Torres
Silvia Torres
Mary Monique Traylor
Anna Treinkman
Keflloe L. Tsotetsi
Lydia Usha
Onekia L. Vann
Gabriela Vazquez
Juanita O. Vazquez
Jeannie M. Wampler
Gene Ward
Wanda Wardlow
Contessia Washington
Rebecca L. Weber
Robert W. Welninski
Susan T. Weyforth
Donald A. Wheeler
Laurie Wheeler
Patricia Wiles
Carolyn Williams
Kimberly Y. Williams
Princess Williams
Tara F. Williams-Wronowski
Lakisha M. Wilson
Mae B. Wilson
Rachel Wolery
Michelle Woods
Jennifer N. Wright
Yiyong Wu
Erin Wyson
Michael P. Yannell
Mary Yarbrough Batteast
Jianxun Yi
Bo Yu
Jingsong Zhou

15 YEARS

Oluwatoyin J. Ajasa
Philip S. Andersen
Elizabeth Anderson
Juanita Araujo
Lucy A. Bakulinski
Beth Nachtsheim Bolick
Kathleen A. Bredael
Pamela L. Brooks
Denise Brown
Felicia L. Brown
Jessie Brown
Shuntay Brown
Theresa M. Burkhart
James E. Butler
Marybeth Byrne
Willie Ruth Carless
I-Ja Chan
Yaping Chu
Mary E. Close
Connie R. Cole
Maxine R. Cooper
Annette Coppage
Remani Daniel
Imogene Davis Neely
Jewel Davis
Audrey P. Dean
Frank Diaz Jr.
Denone E. Dillard
Belva F. Dorris
Margaret Durack
Eileen M. Dwyer
Jennifer S. Earvolino
Pamela P. Ellis
Ellen M. Elpern
Colleen E. Flynn
Brian C. Fruin

Doris Furcron
Estelita R. Garcia
Beatrice Gates
Tonia Q. George
Melissa A. Gerona
Bernadette Gillard
Linda Gonzalez
Linda Greenberg
Lynn A. Grenier
Diane Harris
Evelyn Harris
Janaya N. Harvey
Scott G. Hasler
Catherine Healy-Cleary
Nicole R. Holland
Joseph Iacopelli
Irene Izquierdo
Debra Z. Jackson
Chester J. Januszewski
Sherila R. Jones
Inez P. Kates
Melissa A. Keller
Gail B. Kempster
Flora J. Kidd
Melissa T. Kim
Debra A. Kincy
Paulette E. Klarin
Gregory R. Klein
Aikaterini Kompoliti
Flavio S. Lamorticella
Jacqueline D. Leavitt
Katherine J. Liu
Kateva M. Lopez
Fidel May
Thomas J. McNulty
Jennifer McFadden
Joanne M. Miller
Janice Miller-Cherry
Joel Miranda
Lorita Mitchell
Thomas P. Morgan
Kelly Nash
Ernel L. Nelson
David Novosad
Sharon Nugent
Cynthia M. Olloway
Subhash Patel
Rosemary Peate
Rosalie Perez
Patricia Piasecki
Xavier F. Pombar
Jennifer Quinnert
Venita R. Reed
Jean Han Ren
Alice Ruiz
Araceli Sanchez
Norma Sandoval
Ziba Savodje
David M. Shenker
Sharon Sholiton
Nadine M. Slosar
Scott E. Sonnenschein
Robert S. Spadoni
Stefanie Spanier Mingoelli
Arlene M. Sperhac
Ladonna M. Spinks
Marianne K. Squiller
Mary M. Stewart
Crystal Stiffend
Karen L. Stratton
Margaret W. Sullivan
Michael D. Tharp
Evelyn F. Thomas
Linda M. Towner
Bernard Trinidad
Barbara A. Vanek
Oscar Vargas Jr.
Rhonda L. Walker

Continued on next page

Employee Anniversaries

Continued from page 7

Emily Q. Wang
Samala Washington
Constance L. Weissman
Deidre E. Wesley
Kenneth White
Diana Williams
Caroline Y. Yoon
Julius Zebrauskas

20 YEARS

Joanne Alcock
Deborah L. Allen
Lorraine Allen
Denise D. Altheimer
Diana Alvarez-Grzesiakowski
Russell E. Arnold
Renee M. Ausberry
Ana M. Badillo
Juliana Balderrama
Kim R. Bellettiere
Ed Robert Blazek
Mary A. Borum
Maurice K. Boykin
Patricia C. Bristol
Loretha Brooks
Latasha D. Brown
Sandra Brown
Carolyn Butler
Jocelyn C. Carandang
Maria D. Carreon
Jane P. Carrino
Belinda F. Childs
Sandra L. Christ
James C. Chu
Diane Ciancanelli
Vera D. Clinton
James D. Coleman
Jeanette Coquinco
Corazon A. Cruz
Marcella Cunningham-Watkins
Sheila Marie Davies
Beverly Davis
John F. Davis
Leon Davis
Carol A. DeMeo
Rochelle L. Dean
Angel Delacruz
Liliosa J. Deleon
Mirian E. Diaz
Catherine A. Dimou
Lilia L. Dino
Erma D. Dixon
Kathleen M. Elkow
David M. Estreen
Evangeline Evanich
Denis A. Evans
Gayle A. Fewer
Mary M. Ford
Steve E. Gadomski
Sheila Gamble
Linda D. Gannon
Anna M. Garza
James H. Gazdziak
Wendy Gordon
Irene Haapoja
Shirley L. Hamilton
Jean M. Harris
Mary K. Hayden
Ludella Haymer
Antoinette Henry
Cherie A. Hopkins
Susan F. Howe
Denise Hughes
Noel A. Hylton



Eileen Jaminski
Marzena Janusz
Donna Jennison
Angelo A. Jerry
Antonina S. Jocom
Randall E. Johnson
Maxine Jones
Gerald A. Kaminski
Robert E. Kaye
John E. Kitchen
Jeffrey H. Kordower
Mark J. Kuc
Ann Marie E. Lane
Robert M. Leven
Richard C. Linhart
Meryl E. Lipton
Sherry L. Liske
Mark Lumas
Betty J. Maier
Samarah McCoy
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Beverly J. Myers
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Winston Sequeira
Kathryn C. Shaw
Scott W. Simon
Gertrude Smart
Catherine L. Smith
Joyce A. Smith
Michael Smith
Leonides B. Soriano Sr.
Selmer Spexet
Glenn T. Stebbins
Nicole R. Stewart
Beverly A. Story
Audrey C. Taylor
Ronald G. Terrell
James T. Thomas
Anna L. Tordecilla-Nazareth
Tracy L. Tubacki
Leonard A. Valentino
Annabelle Volgman
Jeffrey D. Westphal



Clarence Williams
Lettie Wilmer
Xiulong Xu
Wen-Hou Yu

25 YEARS

Robert A. Balk
Karen N. Batty
David Bennett
Bryan Bernard
Jeanne M. Billo
Steven D. Bines
Joel A. Block
John H. Brill
Audrey Carlson
Laura H. Chu
Brian L. Clary
Cynthia Comella
Sandra K. Connolly
Linda M. Curgian
Richard Czachorowski
Thomas E. DeCoursey
Kathleen R. Delaney
Daniel J. Deziel
Barbara Engels-Scianna
Carol J. Farran
Dora Alicia Garcia
Narsis Garner
Christine A. Garvey
Anita T. Gewurz
Lynne A. Gunn
Deborah J. Hall
Beverly Hancock
Carl A. Hedberg
Dorothyann G. House
Diana D. Huang
Karen Lois James
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Kathryn A. Knorr
Daniel J. Kopanke
Carol Kraus
Sau-Ping Kwan
Sharon F. Lawrence
Carol M. Lydon
Jose L. Martinez
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John W. Metcalf
Lenora Mosley
Theresa S. Mui-Asai
Cathy Murphy
Mary K. Nash
Karen Marie Newton
Christine Nicholas
Eileen J. Pehanich
Daniel W. Pietryla
Ellis A. Pool
Sharonda Posey
Cheryl A. Raban
Susan J. Reed
Mary Reynolds
David J. Rice
Roger A. Rodby
Judith M. Salitore
Sylvia G. Schwister
L'Tanya Elizabeth Searcy
Jean M. Silvestri
Marjorie A. Swift
Janet L. Targosz
Arlene C. Todd
Roderick K. Tolbert
Linda Trinley



Denise N. Vallier
Kathleen A. Vasquez
Eleanor J. Welch
Joyce L. Zuleger

30 YEARS

Ethel Alexander
Rene V. Balcita
Regina M. Barden
Lynne T. Braun
Max D. Brown
Michael A. Buck
Janet Bynum
Brenda J. Carlvn
Robert E. Carr
Flora F. Chacon
Robbie Coleman
William Crump
Thomas C. Cutting
Carol L. Davis
Wilfredo A. Feliciano
Denise Givens
Hazel M. Graham
Marilyn E. Hall
Virginia Hall
Karen E. Hanley
Patricia P. Hano
Cheryl L. Hayes
Dorothy Hodges
Chaochuan Hu
Donna M. Johnson
Julie M. Karstrand
Ilaben P. Kasudia
Elias Kiros
Caroline S. Kunz
Jerome R. Kuszak
Katherine M. Laffee
Douglas L. Leftridge
Larry J. Lennix
John O. Lepscier
Ann E. Lieb
Shirley A. London
Patricia J. Lundman
Robert P. Malcher
Lindsey D. Mapp
Virginia E. Markvart
Paul H. Matz
James H. Maul
Gladys Medina-Cruz
Marie Neary
Ann Nemeth
Isabel C. Olvera
Lenore B. Opasinski
Janise Page
Willie M. Phillips
Roberto Ramirez
William W. Richardson
Johnny Robinson
Nereida Ruiz
Robert P. Russo
Mary T. Saba
Lang K. Sam
Marilyn L. Sanders
Shawntel Santin
Catherine A. Schneider
Walter Scott
John Segreti
Donna Stel
Mildred Stiff
Howard T. Strassner Jr.
Diann Thomas
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Irene M.P. Toal



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Rosalia Villarma
Lorraine Warren
Martha J. Wash
Rose M. Washington
Jacqueline Williams
Kathryn H. Williams
Lynwood Willis
Kung V. Wong
Donna F. Wrenn

35 YEARS

Melody I. Adams
Philip D. Bonomi
Rimantas K. Buzenas
Ruben C. Cantu
Kathy M. Costello
Kathleen J. Dolan
Edwin A. Evans
George A. Fitchett
Bonnie R. Fourte
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Verhonda Hearon-Eggleston
Glydan Hoffman
Anchalee Inboriboon
Annmarie K. Keenan
Christine M. Keller
Kristine S. Klinetop
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Billy Murphy
Diana M. Paone Cherry
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Dawn E. Reimann
Shirley A. Sapala
Gail Hollins Scally
Beverly A. Sisson
Diane M. Skierkiewicz
William M. Stover
Alicia G. Tiu
Gordon M. Trenholme
Gail M Valadez
Karen M. Vehrs
Phyllis J. Velez
Marshall M. Warren

40 YEARS

Hope Bialek
Robert Chanthimabha
Clarice Danner
Antoinette Davis
Lois M. Gallo
Jane C. Grady
Josephine Internicola
Bobbie McFadden
Andre Metellus
Joel Michael
Rebecca C. Patel
Charlotte M. Ramazinski
Ira Smith
Richard Ward

45 YEARS

Esther Boyd
Lieselotte Mendelson
Mary E. Taylor



Please note: The Founders Day list does not include employees' academic degrees. Human resources has made every effort to ensure this that list is as accurate as possible. If you have any questions, please contact Emma Gillett at ext. 2-5916.

NEWS *rounds*

Rush Charity Care Program Provides a Lifeline for Patients in Financial Difficulty

Connie Frederick was devastated when she was diagnosed with cancer, and her fears increased when she learned that her insurance only covered a small portion of the costs of her treatment. “We didn’t know how we would pay all the bills,” says Frederick, who works part-time at a department store and whose husband Bill is unable to work due to back problems.

Her doctor referred Frederick to a financial counselor at Rush, who determined that she was eligible for the Medical Center’s charity care program. Most of the costs of her treatment at Rush were waived, including expenses associated with months of chemotherapy to treat Frederick’s early-stage fallopian tube cancer, the rarest form of gynecologic cancer.

Today, Frederick’s cancer is gone, her prognosis is excellent, and she has returned to work. “If it wasn’t for everyone at Rush, we don’t know what we would have done,” she says.

Frederick is one of the 2,225 patients who received assistance through Rush’s charity care program last year. During fiscal year 2009, Rush provided more than \$16 million in

charity care and financial assistance for our patients.

Many of the people in the charity care program already are established patients at Rush whose circumstances have changed. “With the economy being the way it is, a lot of our patients have lost their jobs and no longer have health insurance. They may be in the middle of cancer treatment or some other ongoing treatment, and they’re facing a continuation of care issue,” says Stephanie M. Young, who helped Connie Frederick access the charity care program. A financial counselor in admitting until August, Young now assists patients at Rush as a patient access coordinator with Affiliated Radiologists.

Other patients may face financial challenges because their insurance has deductibles that are greater than their means, such as seniors with limited incomes, or they may be employed but unable to afford the cost of their employer’s health insurance plan.

continued on page 2

RUSH PROVIDED MORE THAN \$191 MILLION IN COMMUNITY BENEFITS IN FISCAL YEAR 2009

Charity care is part of the more than \$191 million in community benefits Rush provided overall in fiscal year 2009. The largest portion of these community benefits was more than \$126 million in unreimbursed, but much needed, care that Rush provided to its patients during fiscal year 2009. In addition to charity care, this unreimbursed care also included costs not covered by Medicare and Medicaid and expected payments not received.

Rush also funded \$37.3 million in subsidies for Rush University’s work educating the next generation of health care providers; allocated \$11.5 million for research to improve patient care; and provided more than \$1.9 million in other community benefit programs as well as \$2.3 million of volunteer time for various community service activities of the hospital.

Rush is able to provide and support these services because the Medical Center is a tax-exempt organization, and any revenue that remains after our expenses is reinvested in the organization. Maintaining Rush’s tax-exempt status is crucial to the Medical Center being able to continue providing these critical community services, because it leaves us with the revenues we need to pay for them.

To learn more about Rush’s community benefits, you can find a copy of the 2009 Community Benefits Report online at www.rush.edu. Please go to the “About Us” page and see the bottom right hand side for the Rush community benefits report link. Or you can request a copy of the report from the Rush Department of Marketing and Communications by calling ext. 2-5580.



Stephanie Young counsels a patient about the Rush charity care program.

TRIUMPHANT! RUSH RECEIVES MAGNET DESIGNATION FOR THIRD TIME

Thanks to its outstanding nursing talent and unwavering commitment to patient care, Rush has been awarded Magnet designation for the third consecutive time. This designation is the highest honor in nursing. Rush received the third designation in late September.

Only a fraction of hospitals nationwide have received this prestigious honor — a four-year designation — and even fewer have done it three times.

“The Magnet designation speaks volumes about the quality of care at Rush,” says Jane Llewellyn, PhD, RN, NEA-BC, chief nursing officer. “Receiving Magnet designation again is a testament that our nursing team is among the very best. On behalf of everyone at the Medical Center, I congratulate the nursing staff on this tremendous achievement and thank them for the hard work they’ve done to earn it. Every day they demonstrate that excellence is a core value at Rush with their expertise, compassion, and dedication to our patients.”

The Magnet designation is awarded by the American Nurses Credentialing Center (ANCC) — an independently governed organization within the American Nurses

Association — to hospitals that provide the very best nursing care.

Rush was the first hospital in Illinois serving both adults and children to achieve Magnet status and is the only one in the state serving both adults and children to receive the designation for a third time. In all, a little more than 370 hospitals out of approximately 5,000 nationwide — about 7 percent of hospitals — have received Magnet designation since the program was established in 1993.

The Magnet review process evaluated Rush nursing with regard to quality patient outcomes; innovative, patient-focused initiatives; nursing and interdisciplinary efforts to improve patient safety; the work environment and patient care; professional development of the nursing staff; and efforts to reduce turnover. The review also considered patient complaints, references, and community perspectives. The Magnet appraisal team interviewed more than 600 members of Rush staff as well as community partners, and visited 38 locations, including all the nursing units, during a site visit held in August.

Beverly Hancock, DNP, RN-BC, education/quality coordinator in the Department of



Magnet committee members Erik McIntosh, RN, BSN, CCRN (left), and Diane Gallagher, MS, RN, NEA-BC (right), look on as Jane Llewellyn, PhD, RN, NEA-BC, chief nursing officer, leads the celebration at the announcement of Rush’s Magnet designation.

Professional Nursing Practice, headed the 11-member committee that prepared the 1,800-page application for the Magnet designation and accommodated a site visit by the Magnet evaluation team. Representatives from each of the nursing units also contributed to the process, which began in January 2009.

Magnet hospitals have a reputation for fostering innovation and promoting collaboration, which are key ingredients in providing the very best in patient care. “When you enjoy your job, you excel at what you do. And it shows in the nursing staff here at Rush,” Llewellyn says.

With higher patient satisfaction scores and lower mortality rates, Magnet hospitals consistently outperform non-Magnet organizations. At a time when there is a concern about nursing shortages and patient errors, the Magnet designation gives patients another reason to choose Rush by showing them they can rely on our nursing staff for the high level of care they need.

“Retaining our Magnet status is a crucial part of fulfilling Rush’s vision of being the medical center of choice in the Chicago area,” says Larry J. Goodman, MD, Rush CEO. “I congratulate and thank the entire nursing staff for this accomplishment.”

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NEWSrounds

October 2010

Editor
Anne Burgeson

Managing Editor
Elizabeth Higgins

Contributors
Simone Deaderick, Nancy DiFiore,
Judy Germany, Elizabeth Higgins,
Kevin McKeough, Cassie Vanderwall
and Molly Wolfe

Designer
Kristen Marzejon

Photographers
Steve Gadomski, Leo Garcia and
Bill Richert

Have a news item or story idea for
NewsRounds? Contact the editor at:
Phone: 942-5582
Fax: 563-4149
E-mail: anne_burgeson@rush.edu

Marketing and Communications
Triangle Office Building
1700 W. Van Buren St., Suite 456
Chicago, IL 60612



Rush is a not-for-profit health care, education and research enterprise comprising Rush University Medical Center, Rush University, Rush Oak Park Hospital and Rush Health.

Students and Faculty Mingle During University Tea Events

It might sound old-fashioned, but drinking tea is helping to bring together Rush University students and faculty members in a fun, casual atmosphere once a month. Held at the president’s residence, the Robert W. Sessions House of Rush University, by Larry Goodman, MD, Rush CEO, and his wife, Mikki Goodman, the tea events provide a relaxing forum for professors and students to enjoy each other’s company and to have a bite to eat. The Goodmans began hosting the events last February. They take place every second Wednesday from 4 to 6 p.m. (except for June due to graduation).

Dr. Goodman wanted to create a regular social event where students can interact with other students and faculty in a more casual way, apart from their day-to-day work. Having had such an experience when he was a student, he wanted to share it with students today.

“The university tea events help create a family spirit that is fun for everyone,” says Bob Eisenberg PhD, professor and chairperson of molecular biophysics and physiology.

Mikki Goodman says the tea events give the Rush University administration and faculty a chance to show students a more personal side of themselves that they don’t display in the classroom. “The faculty are able to give students unsolicited time to sit down and chat in a calm environment,” she explains. “They can talk informally with the president or dean, whom otherwise they wouldn’t typically see.”

Each tea event features a different presentation given by a member of Rush University’s faculty, student body or community. The topics range from neurology in the 21st century to how one professor

became interested in night owls versus early birds.

Guests are also treated to food catered by Room 500 staff, under the supervision of James Dravenack, manager of Room 500. The tea, which is quite a hit among students and faculty alike, comes from Todd and Holland Tea, a family-owned business in Forest Park.

“I really enjoy the teas because they provide a unique opportunity for the students to interact with faculty members in an informal setting while learning more about the faculty members’ different research interests. And the chai tea is the best,” says Sarah Swanner, a generalists entry master’s nursing student.

For information about upcoming university tea events, please contact the Office of Student Affairs via e-mail at student_affairs@rush.edu or at (312) 942-6302.

Students and faculty listen to a presentation during a university tea hosted by Dr. and Mrs. Goodman.



RUSH CHARITY CARE continued from page 1

FINDING SOLUTIONS,
EASING MINDS

The four financial counselors in admitting help patients enroll in the charity care program. They review each patient’s financial information and insurance and look for ways to help. If a patient qualifies for Illinois Medicaid, the health insurance plan offered through the Illinois Department of Public Aid, a counselor will explain to the patient how to enroll in the program.

A patient whose household income is too high to qualify for Medicaid but is less than four times the federal poverty guidelines qualifies to have some or all of their hospital expenses covered through Rush’s charity care program. For example, a single person

who makes no more than \$32,490 a year is eligible for the program’s full coverage, and a single individual who makes less than \$43,332 a year qualifies for the 70 percent coverage.

Understandably, patients are anxious when they meet with a financial counselor. In addition to helping them with financial issues, the financial counselors help ease their minds. “We assure them that Rush is here for them, that we’re here to help them and not turn them away just because they don’t have insurance or aren’t able to pay,” Young says. “We explain to them that we understand they have the need for services.”

While the circumstances that cause a patient to need the help of the charity care program vary widely, Young

has found that the patients she helps have one thing in common. “They’re adamant about getting services at Rush,” she says. “They all say the same thing, that Rush has the best doctors, the best facility. The underlying concern in every patient encounter is they want to receive their services here.”

Young takes deep satisfaction in having helped patients receive that care through the charity care program. “It’s a wonderful program. You could actually see the fear removed from a patient’s face because they knew they were going to be taken care of. It changed their tears into smiles of gratitude,” she says. “I saw it over and over again, and that’s an amazing thing to be a part of.”

BIOCHEMISTRY INTERNSHIPS OPEN DOORS TO KNOWLEDGE, OPPORTUNITY

Ashley Powell credits her research internship in the Rush Department of Biochemistry last summer with helping her gain admission to Northwestern University, where she's currently a freshman.

"I think it really surprised some people at Northwestern. Most high schools students don't get this opportunity, and if they do they're not from a minority background," she says.

Powell, who is black, is among the approximately 120 minority students from Chicago high schools who have participated in biochemistry's summer internship program over the past 25 years. In addition to providing a summer job, the paid internships also develop the students' science skills and improve their college admission chances.

"These are strong students who have many options anyway, but the internship gives them an edge for getting into some prestigious schools, such as Harvard, Stanford and Yale Universities," says Thomas M. Schmid, PhD, associate professor of biochemistry and director of the internship program. "We've had a fair number who have gone into medicine and into research."

Each year, between four and eight students receive the internships, which last seven weeks. Students must apply for the program and are selected based on academic merit. "This program is a little reward for students who have worked hard in school. Those stu-

dents are more likely to perform well in the lab," Schmid says.

The interns work full-time for seven weeks. Although a grant from the National Institutes of Health funds their salaries, Rush donates the staff time needed to train the interns and supervise their work, along with providing the lab facilities and the equipment they use.

"That ends up being a fairly large commitment," Schmid says. "They have to be taught everything they need to do, and there has to be someone there each day to guide them. That's almost a half-time position for seven weeks of the summer. As basic scientists, we can't provide health care for the underprivileged, so this is our way of doing community service."

Each intern receives a one-week orientation in basic science technique and then is assigned to work with a biochemistry faculty member in his or her laboratory on a project related to the lab's ongoing research. At the end of the summer, the interns write one-page abstracts summarizing their work and also give 15-minute oral presentations about their work at a departmental seminar.

"They're not just shadowing someone to see what they're doing, they're in there doing some part of a research project. Sometimes they end up being an author on papers," Schmid says.

"The people in the lab give you instructions for the day, explain everything to you to make sure you under-



Ashley Powell works in a biochemistry lab at Rush.

stand, and gradually you become more independent," says Powell, who interned in the department again this summer. She spent a lot of her first internship peering into microscopes examining bone marrow cells from several strains of mice with different susceptibilities to developing arthritis. In her abstract and final presentation, she reported that an enzyme called ADAM TS5 prevents cartilage repair and that removing the enzyme helps protect the mice from developing post-injury arthritis.

Powell says the experience has given her a better understanding of both biochemistry and how laboratory research is conducted. "You get a closer look at

the nature of science. You learn how to work in a lab, how to work well with people, how to be a professional about science and write down everything the right way."

This exposure encourages the interns to pursue careers in medicine and science, according to Hee-Jeong Im-Sampen, PhD, associate professor in the Departments of Biochemistry, Internal Medicine and Orthopedic Surgery, who has worked with interns in her lab. "If they feel medical research is important and interesting, they can grow to be research scientists or research physicians," she says. "That's part of our mission as educators."

Rush's JRB Receives Maximum Accreditation and Designated as a Stroke Specialty Program

The Johnston R. Bowman Health Center (JRB) at Rush University Medical Center has received the maximum three-year accreditation from the Committee on the Accreditation of Rehabilitation Facilities (CARF) for its general inpatient rehabilitation program. For the first time, JRB also has been designated a "Stroke Specialty Program" under

a new set of standards CARF created to recognize excellence in the specific rehabilitative care of people with a diagnosis of stroke. This program is the first and currently the only stroke specialty program accredited by CARF in Chicago.

The mission of the JRB is to provide specialized medical and rehabilitative

patient care service to older people and to people with short-term and long-term disabilities, with a goal of supporting patients throughout their recovery and helping them prepare to return to their community. This is done through an active schedule of therapy.

"Our program showed quality, a clear connection to services within Rush,

and a focus on our patients before, during and after their stay with us," says Anthony Perry, MD, director of the JRB.

The CARF survey team found that patients at Rush benefit from being cared for by experienced and well-trained staff members — including a large proportion of nurses who have earned certified rehabilitation registered nurse certification — a truly interdisciplinary team delivery of care and a strong culture of safety, security and infection control. CARF also recognized Rush Generations, a program that provides educational opportunities in a wide variety of topics for older adult patients and their families.

CARF is an independent nonprofit accreditor of health and human services. It accredits close to 47,000 programs and services at more than 20,000 locations in 16 countries, with the mission of promoting the quality, value and optimal outcomes of services.

Kristin Liebl, PT, DPT, clinical manager of physical therapy, Rush University Medical Center Inpatient/Day Rehabilitation (left), works with a patient in the Johnston R. Bowman Health Center's Inpatient Acute Rehabilitation Program.



Howard Kaufman, MD

ALIGNING CLINICAL WORK AND RESEARCH TO PROVIDE THE

In December, Howard Kaufman, MD, became the first director of the Rush University Cancer Center, which encompasses all of the cancer-related clinical, research and educational efforts at Rush. Kaufman came to Rush from Columbia University in New York City, where he was chief of the Division of Surgical Oncology and director of the Columbia Melanoma Center. A native of Glenview, Ill., Kaufman received his Bachelor of Science degree from the University of Illinois at Chicago and his Medical Degree from Loyola University Chicago's Stritch School of Medicine. He completed a residency in general surgery at Boston University Medical Center Hospital/ Boston Medical Center and fellowships in tumor immunology and surgical oncology at the National Cancer Institute. *NewsRounds* spoke with Kaufman about his plans for the future and the Rush University Cancer Center.

NewsRounds: What are your responsibilities as director of the Rush University Cancer Center?

Kaufman: My goal is to develop a strategic vision for where we're going, to bring people together and to align the research, clinical and educational missions as they pertain to cancer. In many institutions the cancer center coordinates the research activity, and there's a service line that coordinates the clinical care, and they're not always in alignment.

One of the big advantages at Rush is that we are now aligning the two to make sure our clinical programs are developing in concert with our research programs. I have direct oversight of both of these functions.

NewsRounds: What are your plans for the cancer center's clinical care programs?

Kaufman: We know now that the odds of a patient surviving cancer increase significantly when multiple specialists are involved in the care of that patient. These specialists include the medical oncologist, the surgical oncologist, the radiation oncologist, the pathologist, the radiologist, the nurse and the research scientist, among others. The kind of creative ideas, treatment planning and approaches that come out of this comprehensive, multidisciplinary way of taking care of patients clearly lead to longer survival for patients.

Our goal is to provide comprehensive care for all kinds of cancer in this multidisciplinary fashion. Some clinical areas already are doing that. For example, there's a longstanding comprehensive gastrointestinal tumor clinic here that has been doing this for quite some time. Other areas like melanoma are coming together now for the first time. Over the next year, putting together these teams is going to be the major area of focus.

As we move into the new outpatient space on the 10th floor of the Professional Building, which is scheduled to open in January 2011, there's another unique opportunity to come together in a truly multidisciplinary way. We'll have the space for it, and we'll be able to bring other programs for the patients, like integrative medicine, psychosocial oncology and patient education, all under one roof in a state-of-the-art facility.

We have also established numerous disease-site specific tumor boards that review individual patients in a team approach. This provides patients with complex cancer problems rapid access to a full team of experts and to the individualized treatment plans that often result from such conferences.

NewsRounds: How about on the research side? What's in store there?

Kaufman: We're beginning to develop a strong team in basic science. There is considerable strength in immunology and a lot of activity in bone biology. There's also a lot of interesting work going on in behavioral science, preventive medicine and outcomes research upon which we can develop population-based research programs in cancer control and outcomes. This is an outstanding place to begin. Our ability to advance the field is going to go up considerably with

some key strategic recruits in basic science that will help augment where we're going with the clinical programs.

NewsRounds: What about clinical research? Where does it stand now and how would you like to see it develop?

Kaufman: There is already a strong interest in clinical trials at Rush, with almost 100 active clinical studies taking place here across a variety of cancer types. There is also very active participation in a number of national cooperative cancer groups – such as the Children's Oncology Group, Gynecologic Oncology Group and Radiation Therapy Oncology Group – which bring some of the most important clinical studies to our patients at Rush. In the future, I would like to see this effort expanded so that at least 10 percent of Rush's cancer patients are enrolled in clinical trials. In addition, I would like to establish a Phase I clinical trials center at Rush in order to make the newest and most innovative drugs and technologies available to our patients. Achieving this goal will require the development of considerable infrastructure, including a clinical trials core resource of nursing, data management and regulatory affairs personnel, bioinformatics and biostatistics support, and improvements in tumor banking and clinical data.

CLINICAL BENEFIT OF MULTIPLE SCLEROSIS DRUG DISCOVERED AT RUSH

Rush has long been a leader in medicine, with a research program that has helped improve treatment options both at the Medical Center and throughout the world. One example of how Rush research leads to better patient care can be seen in dalfampridine, a drug used to treat multiple sclerosis (MS). Physician scientists at Rush discovered dalfampridine's clinical benefit in treating MS.

The U.S. Food and Drug Administration (FDA) approved dalfampridine earlier this year, making it available by prescription for MS patients. It is the first oral therapy to treat MS, not to mention the first FDA-approved therapy for treating impaired walking, a debilitating symptom of the disease that limits patients' independence and ability to accomplish the most basic tasks of daily living.

Multiple sclerosis is a chronic and often disabling autoimmune disease. In addition to difficulty walking, symptoms include fatigue, lack of balance, heat sensitivity and problems with eyesight and memory.

Multiple sclerosis takes several forms. The relapsing remitting form, the most common, is characterized by unpredictable acute attacks followed by periods of months to years of remission with no new sign of disease. In secondary progressive and primary progressive forms of the disease, there is a steady, permanent neurological decline with no periods of remission.

Tests have shown that dalfampridine works for all forms of multiple sclerosis. While other multiple sclerosis drugs work

by decreasing the MS-related inflammation that causes damage to the central nervous system, dalfampridine is designed to allow conduction of nerve impulses despite the damage.

The research that led to the discovery of dalfampridine's therapeutic value dates back to the 1960s, when Floyd Davis, MD, then a neurologist in training and later a physician at Rush, became intrigued by an unusual clinical observation: Many multiple sclerosis patients fare better when their body temperature is slightly lowered, even by just two- or three-tenths of a degree.

"In multiple sclerosis, the protective myelin sheath that wraps around nerve fibers in the brain and spinal cord is damaged, essentially causing a short circuit," says Davis, who is now retired. "Somehow, lower body temperature enabled the electrical pulse to continue its travel along the nerve fibers. I was completely transfixed by the significance of that fact."

It was important because it showed that the damaged nerve fibers were not doomed, as previously believed, says Dusan Stefoski, MD, director of the Rush Multiple Sclerosis Center, who teamed up with Davis in 1978, shortly after completing neurology training at Rush.

Davis launched a series of laboratory studies to understand the mechanism that explained the improvement in symptoms. He then looked for a compound that could mimic some of the effects of lower body temperature and learned of 4-aminopyridine, or dalfampridine, which blocks the potassium ion channels in nerve fibers.



From left to right: A photograph taken in 1985 of Floyd Davis, MD, and Dusan Stefoski, MD, researchers at Rush, studying the effects of dalfampridine on multiple sclerosis.

"The chemical was commonly used in physiology laboratories where scientists were studying normal nerve conduction, but at the time it was used clinically only by physicians in Bulgaria, then a communist-block country," Davis says. "They didn't know how it worked, but they used it to help patients recover from anesthesia-induced paralysis more quickly."

In 1983, in a small proof-of-concept study, Davis and Stefoski injected the drug in 11 patients whose motor function and eyesight were impaired because of multiple sclerosis. "It was stunning," Stefoski says. "After a single intravenous dose, the patients could walk better and see better."

The drug yielded a consistent improvement in walking speed in two phase III clinical trials conducted by Acorda, a biotechnology company whose mission is to develop and market therapies to restore neurological function in people with spinal cord injury, MS and related conditions of the nervous system.

Walking speed increased by about 25 percent in 35 percent of patients in one trial and in 43 percent of patients in the other, as measured by a standard test called the Timed 25-Foot Walk. Study participants who took the drug also experienced greater leg strength than those who took a placebo.

Stefoski says that although the drug has been approved specifically for the treatment of impaired walking, it also relieves other symptoms of multiple sclerosis since it restores signal conduction in all the affected nerve fibers.

"Rush played a very important role in the development of Ampyra (dalfampridine). In addition to providing state-of-the-art research and clinical facilities with the early establishment of the Rush Multiple Sclerosis Center, it helped to provide flexible funding through private philanthropy. This was largely a joint venture of Rush and generous Chicagoans. I'm very grateful and proud of that," says Davis.

BEST IN CANCER CARE

NewsRounds: The third key component of the cancer center’s mission is education. What are your plans in that area?

Kaufman: We’re talking about beginning to teach medical students the cancer-specific history and physical examination. As patients are beating cancer more and more, it’s important that the primary care physician understands how to do a careful history and physical as it pertains to cancer. We’re also reaching out at the post-graduate level to provide a number of continuing medical education programs, not only for our local physicians but for regional community physicians as well, and to have Rush take a leadership role in training the physicians who are already in practice.

We have also initiated a translational research seminar series that will bring some of the nation’s leading experts in cancer investigation to Rush as visiting professors. This program will offer our current faculty and trainees a chance to interact with some of the top cancer scientists in the country and for us to learn from them. This program will help expand our national reputation and provide invaluable mentorship for our faculty.

NewsRounds: Your ultimate goal is for Rush to receive National Cancer Institute (NCI)

designation as a cancer center. What is the significance of that designation, and how does the pursuit of that designation affect the way you’re organizing the cancer center?

Kaufman: Designation by the NCI is the ultimate confirmation of excellence in cancer treatment, research and education. The integration of the basic and population sciences with our established clinical activity within medical, surgical and radiation oncology would make Rush competitive for NCI designation. If we could achieve this designation, it would mean a sustained increase in patient referrals and an increase in NIH and other peer-reviewed funding. The criteria for NCI designation are also criteria that help build a strong cancer program for our patients, faculty and local community.

Therefore, positioning Rush for NCI designation also positions us for clinical excellence.

NewsRounds: You started here in December. Now that you’ve been here a while, what are your impressions of Rush?

Kaufman: Rush already had a well established national reputation for clinical excellence. The patient care here really is second to none. What I’ve learned since arriving here is that there are considerable resources not only on the clinical side but also on the basic and population sciences side. They just need to be harnessed to focus on cancer. If we can bring them to the cancer question, I think we’ll be highly successful in establishing an integrated cancer center.



In addition to Howard Kaufman, MD, director of the Rush University Cancer Center, the center’s leadership includes the following physicians at Rush:

Phillip Bonomi, MD, associate director for clinical sciences (including both patient care and clinical research)

Kathy Griem, MD, associate director for cancer education

Judith Luborsky, PhD, associate director for basic sciences

Richard Byrne, MD, director, neuro-oncology research program

Stephanie Gregory, MD, director, hematologic malignancies research program

Michael Liptay, MD, cancer committee chair

Edward A. Brennan Entry Pavilion WILL OPEN THE DOORS TO THE NEW RUSH

With the exterior of Rush’s new hospital addition, the East Tower, completed, construction has begun on the Edward A. Brennan Entry Pavilion. It will serve as the gateway to one of the country’s premier patient-centered medical centers. The dramatic, three-story pavilion will embrace Rush’s spirit of innovation by being highly contemporary in appearance, yet welcoming and accessible in approach. It’s expected to be completed in 2012.

The new pavilion, which is being constructed on the north side of Harrison Street, will connect the East Tower to the Atrium Building, providing access to all inpatient areas and most surgical areas. The sunlight-filled pavilion will feature amenities that immediately convey the message that Rush cares about its visitors and wants to make them feel at home. Automatic sensor-triggered doors, which will accommodate people with disabilities, will open up to the spacious pavilion, which includes comfortable seating areas, a centrally located reception area and a four-season terrarium. The terrarium will be encased by a state-of-the art donor recognition and history display that pays tribute

to the people who have made Rush an extraordinary place of healing. The pavilion’s café will provide a gathering place for families and visitors and offer an assortment of light and healthy menu items.

“The pavilion will incorporate the most environmentally ingenious engineering, aesthetics and design, a key mission of the Rush Transformation,” says Mick Zdeblick, vice president, campus transformation. “Every facet of construction has been planned with green building practices and healthy patient environments in mind, earning the project gold-level certification from the U.S. Green Building Council’s Leadership in Energy and Environmental Design (LEED) program.”

According to Zdeblick, LEED promotes a whole-building approach to sustainability by recognizing performance in five key areas of human and environmental health: sustainable site development, water savings, energy efficiency, materials selection and indoor environmental quality. “The new hospital will incorporate strategies from all the major LEED categories, and the transformation project is targeting a 90 percent noise



A rendering of the Edward A. Brennan Entry Pavilion.

reduction that will enhance patient well-being and safety,” he explains.

“The Edward A. Brennan Entry Pavilion is a fitting tribute to the man who recognized Rush’s unique opportunity to transform the future of medicine,” says Sarah Finnegan, assistant vice president, Office of Philanthropy.

“Mr. Brennan was a long-time trustee and chairman of our board. It was his vision that really set the Rush Transformation in motion.”

Log onto the Rush intranet site, <http://inside.rush.edu>, or visit www.rush.edu/transformation for more information.

Employee Awards

Each quarter, Rush employees are recognized for going above and beyond the call of duty for patients, families, visitors and coworkers. These employees are shining examples of the Rush I CARE values (innovation, collaboration, accountability, respect and excellence). The following are the winners of Rush's awards for the fourth quarter of fiscal year 2010.

CLINICAL EMPLOYEE OF THE QUARTER

In the first four months that the Department of Radiology began distributing comment cards to solicit patient feedback, the department received 50 comments from patients praising **Christine Poe-Vasquez**, radiological technologist, for her compassion, kindness and professionalism. Along with providing outstanding direct care, Poe-Vasquez repeatedly has contributed ideas to the department about how to improve the patient experience, such as suggesting ways to position computer monitors to improve communication between patients and registrars. "Christine motivates and inspires everyone she comes in contact with," says Bryan Latham, radiology manager, general radiology.



NON-CLINICAL EMPLOYEE OF THE QUARTER

As a financial counselor in patient access, **Rhonda Hubbard** reviews patient account problems to determine why a patient's insurer rejected a claim or what a patient access coordinator inadvertently may have missed in registering the patient. "If one more piece of information will get an account paid or increase coverage, she is quick to make that phone call," says Audrey L. Lovett, assistant director, patient access. Lovett adds that Hubbard epitomizes the I CARE values, being innovative in creating reports, collaborative with her coworkers, accountable for both her own performance and that of her department, and respectful in all of her interactions. "And she strives for excellence in all of her endeavors," Lovett says.



MANAGER OF THE QUARTER

Teri Sommerfeld, MHA, RN, administrator, Johnston R. Bowman (JRB) Health Center, championed JRB's successful effort to seek Stroke Specialty Certification by the Commission on the Accreditation of Rehab Facilities (CARF) (see related story, page 3). "Not only did Teri help us identify internal and external resources to support certification, she also spent many late nights assembling the paperwork that demonstrated to CARF that we were ready for stroke certification," says Kathy Lynch, RN, admissions coordinator, JRB. The effort was typical of Sommerfeld, who always is available to help her team with whatever issues they face.

From left: Teri Sommerfeld and Kathy Lynch.



TEAM OF THE QUARTER

After a serious security incident took place in the neuroscience unit on the third floor of the Kellogg Building, the **safety initiative for 3 Kellogg** was established to find both a technological and an educational solution to ensure a safer environment for the staff. The team's technology group developed a way to provide bedside nurses with a panic button clipped to their uniform as an immediate way to alert both campus security and staff on the unit of potentially dangerous patient care situations. This new alert system will be applied in other clinical areas. The education group coordinated hands-on training for the entire staff in reducing violent patient behavior. Members of the group also developed a Linking Education and Performance online course in dealing with aggression in the workplace, which will be used to educate the entire nursing staff. "All the team members came together seamlessly, recognized the gravity of the situation and contributed their expertise to a solution," says Paula Dillon, MS, RN, director, medical surgical nursing. "This team is making a significant contribution in creating a safer work environment on the clinical units."

Safety initiative for 3 Kellogg team members (seated, from left): Paula Dillon, MS, RN, director, medical surgical nursing; Susan Larson, RN, MSN, quality coordinator, professional nursing practice; and Kathryn Petrovic, RN, clinical nurse coordinator, psychiatric nursing; (standing, from left) Mike Craig, manager, electrical shop, Medical Center Engineering; Peggy Markosek, RN, unit director, 3 Kellogg/3 Pavilion; and Michael Presser, RN, psychiatric clinical liaison nurse. Not pictured: Alden Brugada, director, telecommunications; Jesus Delgado, director of technical services, information services; Lauris Freidenfelds, director, security services; and Karen Stratton, RN, medical psychiatric consultation liaison nurse.



CAROL STEGE MEMORIAL AWARD

Vasil Vasilev, journeyman electrician, joined the engineering department when it was short on electricians due to other electricians retiring. With minimal training, he learned his way around the Medical Center and its electrical system quickly. Within a few months he was able to work by himself as the electrician on duty over the weekend, which he did every other week despite having a newborn child. He also regularly volunteers to work extra hours. "He is always on time, he's always ready to help others, and he's very skilled in his trade," says Gerald Kaminski, electrical foreman. "The Medical Center is lucky to have a person like him."



4th QUARTER

RUSH VALUES AWARD

The mother of a five-year-old boy recently wrote to Rush CEO Larry Goodman, MD, to praise **Samarah McCoy**, transport specialist, who repeatedly had transported her son during his long stay at the Medical Center. "She is the epitome of a professional, compassionate and conscientious leader. She truly puts the patient first above all else at all times," she wrote.



"The letter was highlighting what Samarah does on a daily basis," says Laurie Sampsel, director of Hospital Transport Services. "She does whatever she needs to make sure people get taken care of. She's always smiling, she has a very pleasant personality, and she's very caring."

When a donor organ becomes available, the transplant recipient needs to come to the hospital as quickly as possible, day or night. Recently, a donor liver became available to a patient who lived in a far Western suburb and had no way of making the trip to Rush. **Reginald McKinnie**, evening and night administrator, spent several hours trying to arrange the patient's transportation and was on the verge of paying for a cab ride for the patient out of his own pocket when the problem was solved. "He is a reliable and responsible employee with a caring nature who went above and beyond to help meet the needs of this patient," says Alicia Smith, assistant vice president of hospital operations.



PATIENT SATISFACTION "STAR"

Every quarter, an employee whose name appears in two or more favorable patient evaluations is awarded the patient satisfaction "star" award. This quarter, the following five stars were honored: **Marlis Frey, APN-BC**, nurse practitioner, Section of Epilepsy; **Thelma Gant**, clinic coordinator, University Neurosurgery; **Bertha Kelly**, patient access coordinator, patient access; **Lindsey Rivers, RN**, nurse, acute surgical care; and **Christian Yager, RN**, clinical nurse manager, Rush University Senior Care. Their patient evaluations included the following comments:

- "Marlis is very professional and knowledgeable. She shows genuine and personal concern about my personal problems apart from my physical malady."
- "My Medicare is still pending, and Thelma helped me about the billing. She calmed me down about my financial problems."
- "Bertha was wonderful in helping to ease my anxiety about my eye surgeries."
- "Lindsey stayed and held my hand all night while doing her work. She is the best nurse you have."
- "Christian was absolutely wonderful. My husband had soiled himself while we were waiting, and Christian helped clean him up, all with so much kindness and compassion."

Seated, from left: Thelma Gant and Lindsey Rivers, RN; standing, from left: Marlis Frey, Christian Yager, RN, and Bertha Kelly.



To nominate someone for a quarterly award, call Clare Quinn at ext. 2-3641.

Appointments

Peter Butler was promoted to president of Rush University Medical Center. He will continue in his role as chief operating officer, and Larry Goodman, MD, will continue in his role as Rush CEO and president of Rush University and the Rush System for Health. The change in title for Butler does not alter his existing reporting relationships, the existing management structure at Rush or his day-to-day duties. Butler has been a key leader in the campus transformation; the increased focus on Rush's mission, vision and values; Rush's leadership development; and the stewardship of the Department of Health Systems Management, where he serves as chairperson and associate professor.

Denise Harmening, PhD, MT (ASCP), recently joined the Rush University faculty to develop an online masters program in clinical laboratory management. Harmening is an educator, administrator, researcher and well-known author. In 2010 she received the University of Texas Medical Branch's 30th annual L. Jean Stubbins Memorial Award. In 2008 she received the American Association of Blood Banks Sally Frank Memorial Award, as well as the Massachusetts Association of Blood Banks Karen Tiegerman Memorial Award.

Rush Medical College has appointed **Dino P. Rumoro, DO, FACEP**, as chairperson of the Department of Emergency Medicine. Rumoro has served at Rush in a variety of capacities since 2001, most recently as acting chairperson of the emergency department and as clinical transformation officer in the Office of Transformation. In the position of chairperson, he will be responsible for the emergency department's academic and clinical activities. In related news, Rumoro was elected as president of the Illinois College of Emergency Physicians (ICEP) for 2010-2011. ICEP is the state medical specialty society representing more than 1,100 emergency physicians in Illinois.

Rush has appointed **Mary Ellen Schopp** to the new position of senior vice president of human resources. In this role, she will focus on the strategic direction of human resources at Rush, leadership development and training. As a member of Rush's senior management team, she also will be the Division of Human Resources' representative to the Board of Trustees. Schopp has 25 years of human resources experience with a customer-focused perspective.

Prior to joining Rush, she was the senior vice president of human resources and communications with Lawson Products, Inc., a Des Plaines-based global distributor of maintenance and repair supplies.

Lynne Thomas Gordon joined Rush in July as associate vice president of hospital operations and director of Rush Children's Hospital. She is responsible for the executive administration and operational oversight of the children's hospital, including high-risk obstetrics and infant care. Gordon is also responsible for the administration of the Department of Pediatrics and multiple hospital services, including the Fetal and Neonatal Medicine Center, the Program for Abdominal and Pelvic Health, the Adolescent Family Center, the Center for Advanced Reproductive Care, the perinatal network, and pediatric subspecialty and ambulatory medical service plan clinics.

Kudos

Eric Alvarez, a first-year Rush University health systems management (HSM) student, received the 2010 American College of Healthcare Executives Minority Summer Internship.

The American Academy of Nursing has selected **Kathleen Delaney, PhD, PMHNP-BC**, professor, College of Nursing, as one of its 2010 fellows. For 20 years, Delaney has made seminal contributions to practice and policy and workforce development in psychiatric mental health (PMH) nursing. Her work has influenced advanced practice PMH education, role development and inpatient psychiatric nursing practice. The academy is made up of more than 1,500 nursing leaders in education, management, practice and research.

In August, **Erin Emery, PhD**, director of geriatric and rehabilitation psychology, and **Robyn Golden, LCSW**, director of Older Adult Programs, accepted the first award for innovative geropsychology training from the National Council of Professional Geropsychology Training Programs for Rush's BRIGHTEN training program, which stands for Bridging Resources of an Interdisciplinary Geriatric Health Team via Electronic Networking. The program offers adults 60 and older the opportunity to receive interdisciplinary assessment and treatment for depression and anxiety through their physician's office.

Stephanie Gregory, MD, director, Section of Hematology, will serve as the program chairperson for the 15th annual North American Educational Forum on Lymphoma. Held in San Francisco, Sept. 24-26, this is the world's most comprehensive educational conference for people with lymphoma. Gregory is the Elodia Kehm Chairperson of Hematology at Rush and is a national lymphoma expert.

Ira Halper, MD, director of the Cognitive Therapy Center in the Department of Psychiatry, has been named a fellow of the Academy of Cognitive Therapy in recognition of his sustained outstanding contributions to the field in the areas of research, teaching and clinical work.

Robyn Hart, MEd, CCLS, director, Child Life Services, has coauthored a book with well known pediatric nurse and author Judy Rollins, PhD. *Therapeutic Activities for Children and Teens Coping with Health Issues* was published by the play therapy division of John Wiley & Sons. Available in November, the 425-page book highlights more than 200 therapeutic activities specifically designed for working with children and teenagers within the health care system.

Second-year HSM student **Jillian Jweinat** received first place in the 2010 Richard J. Stull Essay Competition, sponsored by American College of Healthcare Executives (ACHE). Jweinat presented her paper, "Hospital Re-admissions Under the Spotlight" in March during ACHE's Annual Congress on Healthcare Leadership in Chicago, where she also received her award.

Marilyn Wideman, DNP, RN-BC, director, Faculty Practice and Outreach, and assistant professor, Community, Systems and Mental Health, received a \$50,000 grant in July from the Polk Brothers Foundation to provide mental health services at Rush's School Health Centers. The centers are primary care clinics at Crane and Orr high schools, and the clinics are administered through Wideman's office. **Dawn Boyd, MSN, RN, PMHNP-BC**, instructor, community and mental health systems nursing, is providing the services at the center, with the help of **Kathleen Delaney, PhD, PMHNP-BC**, professor, College of Nursing.

For the fourth consecutive year, **Rush University Medical Center**

earned a place on the Companies That Care Honor Roll. Each organization named to the 2009 Honor Roll sustains a work environment founded on dignity and respect for all employees, develops great leaders, communicates standards of ethics and integrity and actively supports the community, among other outstanding attributes. For more information on the award, go to the Center for Companies That Care at www.companies-that-care.org.

In July, the **Medical Center** officially was elevated to the status of associate hospital in the Region XI (Chicago) Central Emergency Medical Services (EMS) system. This status means the Rush emergency department (ED) will become a telemetry radio base station, responsible for providing in-field medical direction via radio to paramedics at the site of an emergency using standard medical orders understood by emergency medical personnel throughout the city. In addition, the Medical Center now will be intricately involved with the development of Chicago EMS policies and procedures through active participation in Chicago Region EMS operations, strategic planning and education committees. The Medical Center will be directly involved in the education of Chicago Fire Department (CFD) paramedic cadets, along with the continuing medical education of experienced CFD paramedics.

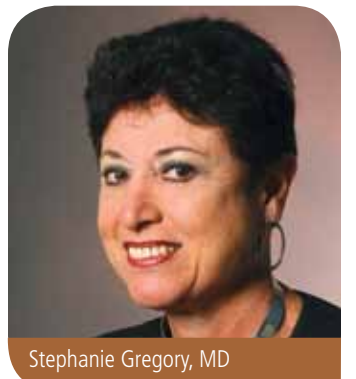
Rush University Medical Group (RUMG) has received the Star Performer Award from the Faculty Practice Solutions Center (FPSC). The award recognizes health care organizations for exceptional participation with the FPSC. The FPSC is a joint effort by the University HealthSystem Consortium, a nationwide alliance of more than 100 academic medical centers and their affiliated hospitals, and the Association of American Medical Colleges, which represents all the accredited medical schools in the United States and Canada and approximately 400 major teaching hospitals and health systems. Engaging with the FPSC so thoroughly both helps RUMG practices improve how they provide care and helps other FPSC plans improve performance.



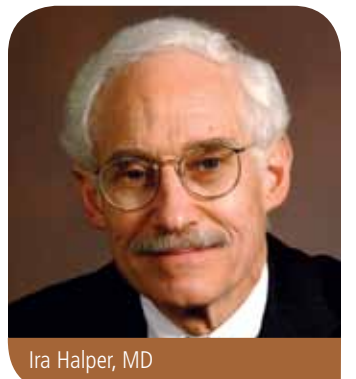
Peter Butler



Kathleen Delaney, PhD, PMHNP-BC



Stephanie Gregory, MD



Ira Halper, MD



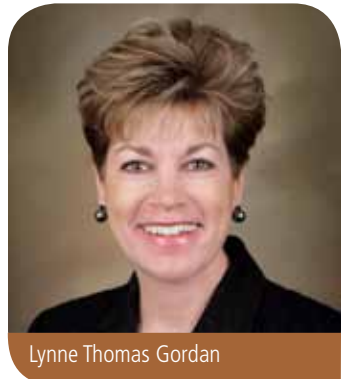
Robyn Hart, MEd, CCLS



Dino P. Rumoro, DO, FACEP



Mary Ellen Schopp



Lynne Thomas Gordon

News Briefs

RUSH RANKS AMONG NATION’S TOP HOSPITALS

U.S.News & World Report again has ranked Rush University Medical Center among the top hospitals in the country in its annual “America’s Best Hospitals” issue. The Medical Center is ranked among the top 50 programs in the country in 11 of 16 categories in the upcoming issue, up from nine categories last year. The “Best Hospitals” issue ran in July. You can see all of the results online at www.usnews.com/besthospitals.

Rush is ranked higher than any other hospital in Illinois in two of the 16 categories. The orthopedics program was ranked No. 10 and the geriatrics program was ranked No. 22 in the nation. The Medical Center program rankings are as follows:

- Cancer, No. 43
- Ear, nose and throat, No. 32
- Gastroenterology, No. 35
- Geriatrics, No. 22
- Gynecology, No. 41
- Heart and heart surgery, No. 25
- Kidney disorders, No. 43
- Neurology and neurosurgery, No. 14
- Orthopedics, No. 10
- Pulmonology, No. 49
- Urology, No. 41

Our cancer and pulmonary care programs returned to the rankings this year. Ear, nose and throat achieved a significant improvement in its ranking, and the heart, orthopedics, geriatrics and gynecology programs all saw increases in rankings as well.

The Medical Center was among a very small number of hospitals nationwide that ranked in 11 or more categories. This accomplish-

ment is particularly noteworthy considering that just 152 of 4,852 hospitals in the United States — only about 3 percent — scored high enough this year to rank in even a *single* specialty category.

“This annual ranking reflects the great work everyone at Rush does,” says Larry Goodman, MD, Rush CEO. “Every day we strive to provide the best possible patient care. As a result, the Medical Center has earned its place among America’s best hospitals.”

According to Goodman, no single set of rankings and quality measures tell the whole story. Earlier this year, Rush was selected as one of the 100 Top Hospitals in the country, based on overall organizational performance, in the annual Thomson Reuters National Benchmarks study. Rush was one of only 15 major teaching hospitals in the country to be named. The University HealthSystems Consortium study on safety and quality has ranked the Medical Center as a top performer among academic medical centers each year of its study. We can be proud of all of these honors.

“But our goal is to provide even better care for our patients,” Goodman adds. “We intend to continue to make improvements across all areas of Rush as a normal course of our work, efforts that we hope will be reflected in the most important outcome, our patients’ health. Congratulations to everyone who has helped us achieve these accomplishments, and thank you all for your continued hard work and dedication to our patients and to Rush.”

GOVERNOR QUINN JOINS RUSH COMMUNITY IN WELCOMING PINK RIBBON CYCLISTS

Illinois Governor Pat Quinn and doctors, nurses, patients and staff at Rush welcomed a team of more than 20 cyclists who arrived at the Medical Center on July 23 at the end of a five-day, 370-mile fundraising ride in support of Rush’s breast cancer research program. Known as the Pink Ribbon Cyclists, the group has raised more than \$100,000 for breast cancer research at the Medical Center with their annual ride. Kim Cook, a patient at Rush, initiated the rides and has organized them for the past six years. Cook’s sisters have been treated at Rush for breast cancer. During the finish line celebration, Governor Quinn made an official proclamation that July 23 will be known as Pink Ribbon Cyclists Day.

Illinois Governor Pat Quinn congratulates Pink Ribbon Cyclists founder and organizer Kim Cook, to the applause of her fellow cyclists and, at far left, Larry Goodman, Rush CEO.



ANOTHER REASON TO EAT YOUR FRUITS AND VEGETABLES

At Rush, keeping people healthy includes helping Rush staff, employees, students and volunteers lead healthy lifestyles. As part of that effort, Cassie Vanderwall, MS, RD, LD, a registered dietitian at Rush and a certified personal trainer, offers tips on healthy eating and activity in each issue of NewsRounds.

Did you get your daily dose of lycopene today? How about quercetin? Anthocyanins? If you’ve consumed any fruit or vegetable today, the answer is most likely yes.

Lycopene, quercetin and anthocyanins are three of the estimated 40,000 phytochemicals found in plants — hence the name phyto, or plant, chemicals. Phytochemicals are found in fruits, vegetables, beans, grains and other plants. These plant-based compounds have either antioxidant or hormone-like properties and can alter our immune system in beneficial ways.

Dietitians recommend phytochemicals for the prevention of many diseases, including cancer, heart disease and diabetes. Currently, research does not support the claims that supplemental phytochemicals are as beneficial as consuming those found naturally in food.

There are many reasons why registered dietitians promote food instead of supplements to meet your vitamin, mineral and phytochemical needs. One of the most important is because the whole food offers many synergistic benefits of the nutrients working together, which you do not receive if you consume only one nutrient alone as a supplement.

This nutritional synergy is another reason to meet the recommended goal of five to 13 servings of fruits and vegetables per day.

Now that autumn is here there’s an abundance of fruits and vegetables available that are loaded with these disease-fighting agents. Nature has made it easy to identify which foods contain which phytochemicals — by their color. Check out the list below to get your taste of the rainbow.

For more information or expert nutrition advice, please call (312) 942-DIET (3438) to schedule an appointment with one of Rush’s registered dietitians.

Phytochemicals — Taste the Rainbow in Fruits and Vegetables

RED	Lycopene, Phytoene, Quercetin, Phytofluene and Vitamin E are powerful antioxidants
ORANGE	Alpha & Beta Carotene and Beta-Cryptoxanthin are promoted as anti-cancer agents
ORANGE-YELLOW	Flavonoids and Vitamin C are popular antioxidants that may prevent certain chronic diseases. Isoflavones are phytoestrogens, that mimic the female hormone estrogen
YELLOW-GREEN	Lutein and Zeaxanthin are promoted as anti-cancer agents
GREEN	Folic acid is said to prevent heart disease Indoles are phytoestrogens that mimic the female hormone estrogen
BLUE-PURPLE	Anthocyanins, Flavonoids and Ellagic Acid are antioxidants that may prevent chronic diseases such as cancer and heart disease
WHITE	Allyl Sulfides may stimulate enzymes that help the body get rid of harmful toxins and strengthen the immune system

NEW CLINICAL LABORATORY SCIENCES PROGRAM NOW OFFERED AT RUSH UNIVERSITY

Rush University’s Department of Clinical Laboratory Sciences now offers a combined program for a specialist in blood bank (SBB) certificate and Master of Science (MS) in clinical laboratory management. This integrated curriculum prepares students for the SBB certificate and for the diplomat in laboratory management exam given by the American Society for Clinical Pathology Board of Certification. The SBB/MS combined program provides comprehensive instruction in blood

group serology, transfusion medicine and laboratory management. The goal of this unique program is to prepare students to assume positions in administration, management/supervision, clinical research, or teaching in a hospital, blood center, university, governmental agency or any health care related industry.

For additional information about this combined program, please visit the Rush University Web site at www.rushu.rush.edu/clsc.

RUSH PULMONARY HYPERTENSION CLINIC

In an effort to better serve patients, the Section of Cardiology and the Division of Pulmonary and Critical Care Medicine recently partnered to form the Rush Pulmonary Hypertension Clinic.

Patient appointments now occur on the same day, in the same clinic, located in suite 1159 of the Professional Building, allowing for greater convenience and shared expertise among specialties. Appointments are available on Fridays from 8:30 a.m. to 4:30 p.m.

The clinic’s team consists of cardiologists James Calvin, MD, and Claudia Gidea, MD, pulmonologist Rajive Tandon, MD, and nurse practitioner Cory Silverman, APN, all of whom have specialized training in the care of patients with pulmonary hypertension.

For more information or to refer a patient to the Rush Pulmonary Hypertension Clinic, please call (312) 942-5020.

RUSH’S GREEN EFFORTS APPEAR ON CNN

Rush’s Green Team has been busy since the Green Fair in April. The recycling committee has focused on various initiatives aimed at expanding the Medical Center’s recycling efforts as well as educating people about Rush’s environmental sustainability programs. The group scored a big coup in June when chair Mary Gregoire, PhD, RD, director, food and nutrition services, was featured on CNN. During the television segment, Gregoire explained

many of Rush’s green efforts, from recycling bins around the campus and green rooftops to biodegradable containers in the cafeteria and special low-flow faucet fixtures.

To see the video, visit the Rush InPerson blog at <http://rushinperson.rush.edu>. To learn more about the Green Team, visit www.rushu.rush.edu, select Information for Students and then Sustainability at Rush.

NEWSrounds

New Outpatient Cancer Center to Open in January

NEW CENTER WILL ENHANCE PATIENT CARE AND COMFORT

Cancer can be overwhelming; cancer treatment shouldn't be. That thought was the key goal behind the creation of Rush's new outpatient cancer center.

To make the process of receiving cancer care more manageable and comfortable, and to enhance physicians' and other caregivers' ability to provide the best care for our patients, Rush is opening the new outpatient cancer center at the Rush University Cancer Center in January. Located on the 10th floor of the Professional Building, the new center will triple the size of the current center.

"The new outpatient cancer center will increase our physicians' ability to collaborate in order to determine and provide the best course of treatment for all of Rush's cancer patients. It also will make all aspects of our patients' experience more pleasant and manageable, including registration, meeting with their doctors, testing and treatment," says Howard Kaufman, MD, director of the Rush University Cancer Center, which encompasses all of the cancer-related clinical, research and educational efforts at Rush.

The new outpatient cancer center is a vital part of the 10-year Rush Transformation, which includes building renovations as well as new

construction and new technology. The transformation is reconfiguring Rush's campus and processes to put our patients and their families at the center of everything we do. These changes support Rush's mission: to provide the very best care for our patients.

Placing Multiple Caregivers and Treatments in One Place

Today, cancer care often involves multiple care providers, such as medical oncologists, radiation oncologists, surgeons and psychologists, and more than one type of treatment. For example, a patient may undergo surgery and also receive both chemotherapy and radiation treatment.

While this multifaceted approach improves results for patients, it also means patients need to meet with multiple doctors. The new outpatient cancer center will provide enough room to place most of Rush's cancer care providers and cancer treatment services side by side in a single location. Outpatient radiation procedures will continue to be performed in the Woman's Board Center for Radiation Therapy.

"Our patients will be able to meet with all of their doctors at the same time and go over whatever issues they need to discuss about their condition and



An artist's rendering of the waiting room in the new outpatient cancer center.

treatment together. Then if they need testing or treatment, they can receive it right in the center during the same day. It makes everything easier on them," says Philip Bonomi, MD, director of Rush's Division of Hematology and Oncology.

In addition, the new center will increase caregivers' ability to meet together to discuss a patient's condition, review diagnostic tests and plan treatment as a group. This sort of expert collaboration leads to care that is highly coordinated and, most important, highly effective. To support this kind of comprehensive

care, the new center will include 15 consultation rooms, compared to the three in the current center. These rooms will be used both for physicians' collaborations and meetings with patients and families. The center also will include dedicated space for each of the Coleman Foundation Comprehensive Cancer Clinics.

Improving the Patient Experience

The new outpatient cancer center will enhance patients' experience from the minute they arrive by providing a larger registration area that will increase

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LEAPFROG GROUP AGAIN NAMES RUSH AMONG COUNTRY'S TOP HOSPITALS

For the second consecutive year, Rush has been named among one of the top hospitals in the country for safety, quality of care and resource use by the Leapfrog Group, a national organization that promotes health care safety and quality improvement.

Rush is one of only 65 hospitals that made Leapfrog's top hospital list for 2010. Rush was one of only five Illinois hospitals and the only hospital in Chicago to be so honored. The top hospitals were

announced at the beginning of December.

"It's a great testament to the high level of skill of everyone who works at Rush that the Leapfrog survey again has found that Rush provides excellent care in an efficient manner," says Larry Goodman, MD, Rush CEO. "We received this honor for a second year in a row because day in and day out, Rush maintains consistently high standards of patient care and safety."

The Leapfrog Hospital Recognition Program measures and evaluates hospital performance to recognize achievements and encourage improvements in the efficiency of hospital care. The program's latest rankings drew on information gathered through the 2010 Leapfrog Hospital Survey, which compiled data reported by about 1,200 hospitals in 45 states. The survey is the only national, public comparison of hospitals on key issues, including mortality rates for certain common procedures, infection rates, safety practices and measures of efficiency.

To be designated a Leapfrog Top Hospital this year, hospitals in urban settings such as Rush needed to fulfill the following criteria:

- Fully meet Leapfrog standards for using computerized physician order entry systems, which have been shown to reduce adverse drug events by up to 88 percent. To be named a top hospital, physicians at the institution must enter at least 75 percent of medication orders through this type

of system, and the hospital must demonstrate in a test that the system can alert physicians to at least half of common serious prescribing errors.

- Fully meet at least half of the stringent performance standards for complex, high-risk procedures performed at the hospital, such as heart bypass surgery. Research indicates that a patient's risk of death is reduced between two and four times, depending on the procedure, if the care is received at a hospital that meets Leapfrog's standards.
- Meet standards for staffing the intensive care unit with doctors and nurses specifically trained in critical care, which have been shown to reduce mortality by 40 percent.
- Achieve a score of at least 69 out of 100 for efficiency (the intersection of quality and cost). The Leapfrog Hospital Recognition Program measured efficiency in terms of quality outcomes and resource use, with quality weighted more heavily.

"At a time when hospitals are facing twin pressures to control costs even as they provide better, more advanced care, Rush rose to the challenge," Goodman says. "I'm grateful to everyone at the Medical Center for the hard work and excellence that made this achievement possible."

Rush also again scored highly in the University HealthSystem Consortium's (UHC) annual Quality and Accountability study. The Medical Center ranked among the top 20 out of 98 academic medical centers nationwide surveyed in the study.

The UHC is an alliance of 110 academic medical centers and 254 affiliated hospitals that helps its members to improve clinical, financial and operational performance. The 2010 study evaluated academic medical centers on the basis of mortality, effectiveness, patient safety, equity of care, efficiency and patient centeredness. •



Clinicians at Rush tend to a patient, joined by Rush University students on their clinical rotations. Standing from left to right: Dana Merck, student, Rush University College of Nursing; Rochelle Sisco, MHA, director of clinical education, Respiratory Care Program; Katherine Liu, MD, professor, general surgery; Thomas Holland, student, Rush Medical College.

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NEWSrounds

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Editor
Anne Burgeson

Managing Editor
Kevin McKeough

Contributors
Nancy DiFiore, Anthony Giornalista,
Elizabeth Higgins, Jody Lempa
and Cassie Vanderwall

Designer
Kristen Marzejon

Photographers
Steve Gadowski, Leo Garcia and
Bill Richert

Have a news item or story idea for
NewsRounds? Contact the editor at:
Phone: 942-5582
Fax: 563-4149
E-mail: anne_burgeson@rush.edu

Marketing and Communications
Triangle Office Building
1700 W. Van Buren St., Suite 456
Chicago, IL 60612



Rush is a not-for-profit health care, education and research enterprise comprising Rush University Medical Center, Rush University, Rush Oak Park Hospital and Rush Health.

OUTPATIENT CANCER CENTER

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privacy and accommodate more staff, reducing waiting times. After checking in, patients will meet with a nurse who will review their schedule for the day. “There are so many aspects involved in cancer care — doctor’s visits, blood work, chemotherapy, X-rays or CAT scans, procedures — it can get confusing. This approach will help make sure everyone’s on the same page,” says Sharon Manson, MS, NP, director of nursing for the Division of Hematology and Oncology.

The outpatient cancer center frequently receives visits from unscheduled patients who are feeling ill due to adverse reactions to their chemotherapy or the suppressed immune systems it causes. Now those patients will be triaged and when needed seen immediately by a nurse practitioner, who will consult with an attending to determine a treatment plan. “The goal is to provide the best care for our patients and help them avoid emergency room visits and hospital admissions,” Manson says.

The new outpatient cancer center also will include the following features:

- A larger chemotherapy area with 56 infusion stations, 20 of them private, compared to a total of 36 stations in all in the current center. Family members will be able to visit with patients during treatment, an improvement on the space constraints in the current center that limit such visits. Because in some cases chemotherapy can take up to 12 hours, the area will include two rooms with beds for patients receiving such treatments.
- Room for the Integrative Medicine Program’s complementary therapies, such as nutritional counseling, psychosocial counseling, massage therapy and acupuncture, which promote patients’ sense of well-being and maintain their quality of



An artist's rendering of caregivers conferring in the Janet Wolter, MD, Clinical and Educational Conference Room in the new outpatient cancer center.

life. These services now are being provided in a separate area from the current center. The new center also will provide room for palliative care and pain management.

- State-of-the-art patient exam and procedure rooms equipped with technology that will allow physicians and patients to review electronic records and diagnostic tests together. There will be 45 exam rooms, 15 patient consultation rooms and three procedure rooms, including designated rooms for diagnostic gynecologic and bone marrow procedures. By comparison, the current center has 23 exam rooms and a lone procedure room.
- An expanded resource library where patients can learn more about their illness and care, with computers and reference materials and an art room for therapy. The library also will be home for the American Cancer Society’s patient navigator, a counselor who will help patients and families coordinate treatment and support services.
- The Janet Wolter, MD, Clinical and Educational Conference Room, named for a physician who treated cancer patients at Rush for 46 years, equipped with smart boards and imaging technology to the training of tomorrow’s caregivers.

Responsive, Environmentally Responsible Design

The design of the new outpatient cancer center was guided by the people who will use it: patients and caregivers. Rush created six advisory groups of patients, clinicians, patient advocates and providers of ancillary services to review the design and make sure that the center’s form optimized its function. A model exam room and infusion pod gave clinicians the opportunity to try out the space and make sure it best serves the needs of our patients.

In addition, the center will fully integrate a number of environmentally sustainable features. Rush will seek Leadership in Energy and Environmental Design certification from the U.S. Green Building Council once the facility opens.

“Rush has put a great deal of thought and care into making the new outpatient cancer center an environment that optimizes our ability to provide care and makes receiving that care easier on patients, both physically and emotionally,” Bonomi says. “We owe it to our patients to provide the best care we can in the most comfortable circumstances we can, and this center will enable us to achieve that goal.” •

For more information, please call (312) 942-0600 or e-mail cancer_center@rush.edu.

Laurance Armour Day School Celebrates 40 Years At Rush

Birthday cake, music, a parade and parties with honored guests. That’s the way to celebrate a big birthday, and that’s just what the Laurance Armour Day School (LADS) did during its weeklong 40th birthday celebration in September.

LADS provides early childhood education and care for the young children of Rush

employees, as well as a before- and after-school program for children from the surrounding community ages five to 11 years old. LADS is one of the first and one of only 18 licensed childcare centers in Illinois that are operated by employers in order to serve employees’ children, according to data from the

Illinois Network of Child Care Resources and Referral Agencies.

As part of the celebration, Jane Grady, PhD, associate vice president of human resources, who was director of LADS from 1970 to 1995, and Hats Adams, director of community affairs and the driving force behind Rush’s Science and Math Excellence network, were honored at a special ceremony.

“Jane and Hats are inspiring and are always thinking about what’s next,” said Peter Butler, chief operating officer and president at Rush.

Trees were planted in their honor on the LADS playground. During her speech, Grady thanked senior leaders, other directors, the teachers and the families. “Most of all, I want to thank you, the parents, who have entrusted us with your children,” Grady said. •

For more information about LADS, please call ext. 2-6501.



LADS students, their parents and staff members take part in the 40th anniversary festivities.

NEW RUSH UNIVERSITY PHYSICIAN ASSISTANT PROGRAM HELPS MEET GROWING NEED FOR CAREGIVERS

As the national shortage of physicians increases, physician assistants (PAs) increasingly are called upon to fill the gap, and Rush University is helping to educate them.

To help meet the growing need for these health care providers, last spring, the College of Health Sciences at Rush University began offering a Master of Science in Physician Assistant Studies. The program prepares students to be primary care physician assistants and provides additional training in specialty areas of clinical practice. In March 2010, the program received its initial accreditation from the Accreditation Review Commission on Education for the Physician Assistant.

PAs are health care professionals licensed to provide medical care with physician supervision. They perform a comprehensive range of medical services, which include performing physical exams, ordering and interpreting diagnostic tests and X-rays, prescribing medications, treating injuries, and diagnosing and treating illnesses. According to the American Academy of Physician

Assistants, as of January 2009, there are approximately 68,100 practicing PAs in the country. The United States Department of Labor predicts that employment of PAs is expected to grow by 39 percent from 2008 to 2018.

The Rush University physician assistant master's degree program offers an innovative 33-month curriculum. During the first 12 months, classroom lectures prepare students for clinical rotations. The following 21-month clinical training portion of the program will prepare students to practice as primary care providers, as well as provide a unique opportunity for advanced training in a medical or surgical specialty area. Rush University's PA program is the only one in the country that includes 21 months of clinical training.

"We are pleased to offer this new educational program, which we believe will help advance our mission to provide the very best care to patients," says Regina Chen, MS, the director of the program. Chen joined Rush in August 2009 from Rosalind Franklin University in North Chicago, where she was



Meggan McCarthy, BSN, assistant professor, physician assistant program, leads a class.

academic coordinator and assistant program director of the physician assistant program.

There are only 154 programs in the country that offer this type of degree. Rush's program is unique in that for the last nine months of clinical training, students choose and focus on a specific area of medicine, such as cardiothoracic surgery, vascular surgery, orthopedic surgery, emergency medicine, internal medicine, pulmonary medicine or critical care medicine. "The education is focused on

primary care, but we want to provide an enhanced learning experience in advanced clinical practice," Chen explains.

The program began its first class in June with a class of 18 students; the admissions cycle for the second class has already begun. The deadline for application submission to the program is January 2011. For more information, contact the PA program at (312) 563-3234, or visit the Rush University Web site at www.rushu.rush.edu/pa-program. •

NEW RUSH CENTER FOR URBAN HEALTH EQUITY HELPS IMPROVE CARE FOR UNDERSERVED \$10 Million NIH Grant Supports Center's Efforts

Rush is committed to treating patients from all backgrounds and improving health care for all people. As part of this commitment, Rush has established the new Center for Urban Health Equity, which is partnering with underserved black and Latino communities to conduct research trials of interventions aimed at reducing the disproportionately high rates of heart and lung disease affecting these communities. Demonstrating Rush's standing as a research institution, the Medical Center received a \$10 million National Institutes of Health (NIH) grant to establish the center.

"Health disparities have persisted or worsened in the past two decades, despite efforts to narrow the gap," says Lynda Powell, PhD, director of the center and chairperson of the Department of Preventive Medicine. "We must find a way to change this situation."

For example, three blacks are hospitalized for heart failure for every one white. The NIH's National Heart, Lung and Blood Institute provided Rush with funding not simply to continue to document this disparity, but to do something about it. Rush was in an ideal position to compete for and win funding for the center, because the Medical Center is nationally recognized for excellence in conducting vigorous but culturally sensitive behavioral interventions to improve heart health.

The center supports initiatives by researchers at Rush to improve patient care in underserved communities and to bring about changes in behaviors among community members that will lead to their improved health. The center draws from a multidisciplinary team of basic science and

clinical researchers in cardiology, behavioral sciences, gerontology, endocrinology, biostatistics, epidemiology, pharmacology and physical medicine. The interventions they develop and test will address a variety of targets, including the community, the family, the social network, and individual psychosocial and behavioral risk behaviors.

The center is supporting the following three research projects, which are already under way:

- A clinical trial led by Powell and James Calvin, MD, director of the Section of Cardiology, which aims to reduce repeated hospitalization in low-income heart failure patients. The trial is providing physician education to help doctors practice evidence-based medicine for patients with heart failure. For example, the correct medication for a patient with both heart failure and asthma is different than it is for a heart failure patient without asthma. In addition, the trial is teaching patients self-management skills to help them adhere to their medications and limit their salt intake.
- The BRIGHTEN (Bridging Resources of a Geriatric Health Team via Electronic Networking) Heart trial is led by Steven Rothschild, MD, assistant director of the center, vice chairperson, preventive medicine and associate professor, Department of Family Medicine, and Erin Emery, PhD, director of geriatric and rehabilitation psychology at Rush. The trial uses virtual teams – care providers who communicate via a secure computer server – to assess and treat depression among minority older adults with depression-related metabolic problems such as hypertension, abnormal lipid levels, obesity, glucose intolerance

and elevated protein levels. The project will screen blacks and Latino older adults for depression in community primary care clinics, treat those with depression, and compare the results to a control group that receives education and standard care.

- A team of Rush researchers led by Molly Martin, MD, assistant professor of preventive medicine and pediatrics, is looking to develop an intervention to control asthma in obese, high-risk children. The team has developed strong partnerships with organizations in Chicago's Humboldt Park neighborhood in order to address influences at school and at home that might reduce weight and promote self-management of asthma.

What makes the Rush Center for Urban Health Equity unique is that the people in the communities that the center serves are actively involved. Both Powell and Martin's studies employ community health workers to provide patient education. "We do not want researchers or clinicians to tell people what they need to do to be healthier," Powell says. "Instead, we train people from the community who share similar cultural backgrounds to provide health education and skills to manage disease in ways that are clear and meaningful."

As part of this focus, the center also will work to promote community partnerships in future health interventions. "Our vision is that members of a community organization who realize their community has a health problem can call on Rush. We want to be a partner of choice for underserved Chicago communities," Rothschild says.

The center also plans to train the next generation of researchers who will foster



Lynda Powell, PhD

cardiopulmonary health equity in the future. This effort will include supporting initiatives in the Chicago Public Schools to promote health careers and working with minority-serving institutions like Chicago State University and Malcolm X College to help students gain experience in community-based research and, hopefully, develop motivation to pursue research degrees.

"Progress on health disparities has been slow in the United States, and even slower in Chicago. This problem is particularly acute in the area of heart disease where black/white disparities have gotten worse over time," Powell says. "We refuse to sit idly by and continue to watch this happen. We want to work toward an elimination of the health disparities that are cutting short the lives of our families, friends and neighbors." •

“Changing the Face of Medicine”

EXHIBIT CELEBRATES WOMEN’S CONTRIBUTIONS

Women now make up about half of the medical students in the country, but until recently female doctors were a rarity. In 1969, only 9 percent of medical students in the United States were women, and in 1985 women made up only 15 percent of practicing physicians in the country.

The exhibit “Changing the Face of Medicine: Celebrating America’s Women Physicians” presents the many ways that women have influenced and enhanced the practice of medicine. The exhibit will be on display from Monday, Jan. 3 through Sunday, Jan. 30, in the fourth floor lobby of the Atrium Building.

“Changing the Face of Medicine” is a presentation of the National Library of Medicine, part of the National Institutes of Health, in conjunction with the Chicago-based American Library Association. The traveling exhibit has been visiting academic medical centers across the country since February 2009.

“We’re very proud and fortunate to host this exhibit, which combines in-depth scholarship with an appealing and innovative multimedia presentation,” says Christine Frank, MLS, director of the Library of Rush University Medical Center.

A series of panel displays combine text and historical photographs to tell the story of women who overcame prejudice and achieved breakthroughs to advance both the role of women in medicine and the practice of medicine itself. The exhibit also includes two computer kiosks that offer multimedia features.

Additional information will be available showcasing the role of other female health care providers and promoting women’s health services at Rush.

“Changing the Face of Medicine” is intended to inspire young people to consider careers in the sciences, to document the achievements of women physicians and to acknowledge the importance of different perspectives



The “Changing the Face of Medicine” traveling exhibit on display at the University of Pittsburgh. Photo courtesy of the University of Pittsburgh

in developing quality health care for all. An overarching theme of “Changing the Face of Medicine” is the importance of diversity in medicine, which benefits from having a broad range of perspectives and advocates for each group in society.

Frank believes it’s fitting that the exhibit will be on display during Rush’s second annual diversity week,

Jan. 25-29 (see related story at right). “Women were a minority population for many years in health care, and they have increased in numbers, but it’s been a long journey,” she says. “This exhibit showcases pioneers who provide inspiring examples for women who aspire to health care careers and for anyone who’s a member of an underrepresented group in the health care professions.” •

THONAR AWARD WINNER INSPIRES THOSE WITH AND WITHOUT DISABILITIES

After Erica Beth Van Zuidam lost all four of her limbs as a college freshman, an occupational therapist at the Rehabilitation Institute of Chicago taught her how to use her prosthetic arms and legs and helped her begin her life again.

That experience inspired Van Zuidam to change her career goal from being a high school math teacher to becoming

an occupational therapist herself. She now is a second-year student in the master’s degree program in occupational therapy at Rush University.

In recognition of her courage, determination and desire to help others, Van Zuidam received this year’s Eugene J-M.A. Thonar PhD Award. Named for a Rush professor of biochemistry, the award is given to a Rush employee, faculty member, student or volunteer who reflects Rush’s commitment to turning disability into opportunity. Van Zuidam is only the second Rush University student to receive the award in its 19-year history.

In presenting the award during a Nov. 16 ceremony in the Professional Building’s Searle Conference Center, Larry Goodman, MD, Rush CEO, commended Van Zuidam “for being both student and teacher, for furthering our understanding of health care by sharing her experience and her spirit, and for exemplifying the best of the Rush I CARE values.”

According to her nominators, Clare Giuffrida, PhD, chairperson, Department of Occupational Therapy, and Paula Jo Belice, MS, project manager, Department of Preventive Medicine, and previously assistant professor, occupational therapy, Van Zuidam has excelled in her classes with minimal accommodation, displaying creativity, ingenuity and humor. She brings lectures alive by sharing her experiences and making fellow students feel comfortable asking questions about disabilities.

“Going through therapy, I experienced first-hand how occupational therapists help people with physical impairments or disabilities relearn how to perform everyday activities. It gave me enormous appreciation for the work they do,” Van Zuidam says. “It made me want to work with people with physical disabilities and provide them with a firsthand example that you can recover and you can thrive.”

In her spare time, Van Zuidam counsels other young people who have lost limbs, serving as a model of strength and achievement. She is an active member of her church in her home town of Lansing, Ill., runs 5K races with the Bladerunners (a group of runners who use prosthetic racing blades) and swims. She loves shoes and is hoping one day to design shoes and clothes for amputees.

“While so much has been taken from her, this remarkable woman

manages to give her spirit and energy to everyone around her,” said Belice, who was Van Zuidam’s advisor. “We should feel honored she decided to pursue her degree at Rush. She is deserving of the award not only for her contributions here, but for her dedication to helping other young women amputees.”

Belice admits that Van Zuidam was reluctant upon learning she was nominated for the Thonar Award. “She wanted no accommodations in the first place and only applied with my urging,” Belice explained. “She wanted to just be herself and blend in with the rest of the students, which she’s been very successful doing.”

Making it possible for Van Zuidam and other people with disabilities to have the same opportunities as others is the goal of the Americans with Disabilities Act (ADA), which protects qualified individuals with disabilities from discrimination while providing for equal access and opportunity. The ADA was signed into law on July 26, 1990, making this year its 20th anniversary.

The anniversary’s significance was not lost on Van Zuidam, who acknowledges that without the passage of the ADA, she never would have completed her college education. “I’m very humbled by this award,” she said. “I simply want to succeed and live my life to the fullest.” •



Erica Beth Van Zuidam learns how to use a leg lifter during a car transfer so that she can teach her future patients to use the device.

The following events will take place at Rush in conjunction with the “Changing the Face of Medicine” exhibit:

- **A reception** celebrating the exhibit’s opening, Friday, Jan. 7, at noon in Room 994 of Armour Academic Center. The reception will include a key-note address from by Julie Freischlag, MD, a former Rush medical student who now is the William Stewart Halsted Professor and chairperson of the Department of Surgery at the Johns Hopkins Hospital in Baltimore.
- **Presentations** by members of the Rush Archives staff on the history of Rush female physicians and nurses in the late 19th and early 20th century, Thursday, Jan. 13 and 20, at noon in Room 539 of Armour Academic Center.
- **A talk** on Tuesday, Jan. 25, at 4 p.m. in Room 994 of Armour Academic Center by Alice Eagly, PhD, chairperson of Northwestern University’s Department of Psychology. The talk is being sponsored by the Rush Diversity Leadership Group, which helps the Medical Center with direction and guidance regarding improvements in diversity, inclusion and equity.

For additional information, please contact Christine Frank at ext. 2-8735 or Christine_Frank@rush.edu.

CELEBRATE DIVERSITY WEEK JAN. 25-29

Diversity week will take place Jan. 25-29. The annual series of presentations and discussions celebrates diversity at Rush and helps the members of the Medical Center community better understand each other.

“By appreciating and respecting our differences, we can work together to better achieve our mission,” says Bob Clapp, senior vice president for hospital affairs, executive director, Rush University Hospitals and chair of Rush’s diversity leadership initiative.

Among many important activities, the schedule of diversity week events includes the presentation of the J. Robert Clapp, Jr. Diversity Leadership Award, which is given to a member of the Rush community who has taken a leading role in advancing diversity and respect at Rush. The award program will take place on Jan. 27 from 4 to 6 p.m. in the Brainard room of the Searle Conference Center on the 5th floor of the Professional Building. It will be followed by a reception from 6 to 7 p.m. in Room 500 in the Professional Building.

For additional information about diversity week events, please see the insert in this issue of NewsRounds or visit the Rush intranet site at <http://inside.rush.edu>.

PROGRAM HELPS PATIENTS WITH INTELLECTUAL DISABILITIES

Many people feel frightened and confused about going to the hospital. These feelings can be even greater for people with intellectual disabilities. Research about the hospitalization experience of such individuals indicates that they have longer lengths of stay; feelings of vulnerability, loss of control and fear of what was going to happen to them; and difficulty in communicating and interacting with health care providers.

To address this problem, Rush has taken several steps to meet the special needs of patients with intellectual disabilities. Rush has implemented a prehospitalization program to help patients with intellectual and developmental disabilities and their families become acclimated to the Medical Center prior to the patient receiving care, either as an inpatient or outpatient. Rush also conducts a program to educate employees about how to communicate effectively and appropriately with these patients.

“Our efforts reflect Rush’s mission to provide the best possible care to all people, including special needs populations,” says Robyn Hart, MEd, director of Child Life Services. Hart led the initiatives along with Sarah H. Ailey, PhD, APHN-BC, associate professor in the Department of Community Systems and Mental Health Nursing.

The effort grew out of a discussion that arose during one of Rush’s quarterly town hall meetings with Larry Goodman, MD, Rush CEO, when an audience member asked a question about adult patients with intellectual disabilities and how prepared they were to come to the hospital. In response, Ailey and Hart set out to determine how Rush could address the needs of these patients.

To guide their work, they assembled the Adults with Intellectual and Developmental Disabilities Committee (AIDDC), a collaborative and multidisciplinary team of Rush personnel from human resources, internal medicine, interpreter services, neurology nursing, occupational therapy, psychological nursing, Rush University Medical Group, social work and special education. In addition, the committee drew on external sources at Misericordia, a Chicago not-for-profit organization that provides housing and services for people with developmental disabilities, and the University of Illinois at Chicago’s Department of Disability and Human Development.

“This committee has drawn on collective areas of expertise that the members did not have individually,” Hart says.

“The committee members also have experiences working with people who have particular developmental needs,” Ailey adds.

Hart stresses that a guiding principle of the program is that adults with intellectual disabilities aren’t children in adult bodies and shouldn’t be treated as such.

The program maintains a help line, (312) 942-7806, to assist caregivers and Rush personnel who work with adult patients with intellectual disabilities. “We encourage anyone who works with this population and has questions, concerns or requests for assistance to give us a call,” Hart says.

The help line staff will determine what assistance is needed. The program’s services may include arranging for the patient to receive a tour of the Medical Center prior to receiving care, accompanied by the patient’s caregiver and a Rush staff member.



Sarah H. Ailey, PhD, APHN-BC (left) and Robyn Hart, MEd (right), work on the program for adult patients with intellectual disabilities.

The program also may provide a referral to occupational therapy at Rush for inpatients having difficulty coping with the hospitalization.

To complement tours, the committee created books for the patients that address specific procedures they may undergo, such as an MRI or blood test. Using visual and touchable aids and a checklist, the books help patients understand the reason for the procedures and what their experience will be like.

The employee education program includes ongoing workshops about topics ranging from individuals with severe and profound disabilities to how to explain procedures such as MRI and electrocardiography. Nurses, social workers, dietitians, and members of the EEG unit, Food and Nutrition Services and Child Life Services staff have attended the sessions.

“The educational program helps employees be more sensitive to the communication issues that are involved in working with these patients,” Ailey

says. “For example, autistic patients may react strongly to light, touch or sounds.”

The committee also arranged several events during October, which was Disability Awareness Month, including discussions about demonstrating respect when working with people with disabilities and how to care for people with autism.

Currently, there is an insufficient amount of research on the health care and hospitalization experiences of adults with intellectual disabilities. The AIDDC hopes to generate more research and examine ways to improve these patients’ experiences.

“We want to help Rush’s patients with intellectual disabilities cope with their health care experience,” Hart says. “But our overall goal is to educate other health care providers who work with this population and further what we’ve learned about the challenges involved.” •

For more information, please call the program help line, (312) 942-7806.

Employee Awards

2ND QUARTER

Every quarter, Rush employees are recognized for going above and beyond the call of duty for patients, families, visitors and co-workers. These employees are shining examples of the Rush I CARE values (innovation, collaboration, accountability, respect and excellence). The following are the winners of Rush's awards for the second quarter of fiscal year 2010.

CLINICAL EMPLOYEE OF THE QUARTER

Tresca Wilson, RN, weekend clinical nurse, surgical intensive care unit (SICU), has exceeded the expectations of her peers and patients during the past 12 years. "Tresca's enthusiasm and positive attitude are contagious and complement her ability to communicate with patients, family members and her fellow staff in a very articulate manner," says Melissa Browning, clinical nurse specialist, SICU. Drawing on her experience at Rush, Tresca has become a mentor for nurses preparing to become charge nurses as well as her fellow charge nurses. Aside from her can-do attitude, stellar leadership skills and infectious laugh, Browning says, "Tresca has fun, which is such an asset in a charge nurse leading the shift."



NON-CLINICAL EMPLOYEE OF THE QUARTER

Charged by Larry Goodman, MD, Rush CEO, to convey the enormity of the new hospital building, **Lisa Aaronson**, senior director of development communications and events, philanthropy, worked with a team to create a futuristic video of a spaceship hovering over the building's construction site that transformed into a picture of the new East Tower. "A great skill set, confidence, creativity and just plain old hard work" are all abilities Aaronson brings to her role, says Sarah Finnegan, assistant vice president of donor engagement. The philanthropy department is responsible for raising more than \$300 million in contributions from donors in support of Rush's mission. "Lisa's support of our philanthropic efforts is one reason we have been so successful," Finnegan says.



MANAGER OF THE QUARTER

Catherine Kittridge, administrative manager, behavioral sciences, is always available to provide support and solace for others. Kittridge has supported colleagues through broken hearts, career downturns and family deaths. "You just know that she'll say the right thing and be there for you," says Stevan Hobfoll, MD, professor and chair, behavioral sciences, Kittridge's manager. The first person to arrive at the office and the last one to leave every day, Kittridge operates under one standard – "the work has to be done, finished and perfect, and there can be no loose ends," Hobfoll says.



TEAM OF THE QUARTER

The **Cancer Integrative Medicine Program (CIMP)** was established to provide patients with complementary and integrative therapies to address the physical, emotional and spiritual impact of cancer and its treatment. Combining compassion and professionalism, the program's members have collaborated successfully to help patients using a holistic approach. Support for the program from referring physicians and other health care providers at Rush continues to grow, and patients consistently provide positive feedback full of gratitude for the care they have received. "They are a very unique group of professionals who help our cancer patients heal in mind, body and spirit," says Erin Schneider, social worker and patient navigator with the American Cancer Society at Rush University Medical Center, who refers many patients to the CIMP team.

(Standing from left) Caryn Blanton, administrative assistant; Allison Grupski, PhD, post doctoral fellow; Andrea Canada, PhD, psychosocial oncologist; Kurrie Wells, PhD, psychologist; and Aisha Kazi, PhD, psychosocial oncologist. (Seated from left) Janine Gauthier, PhD, director, psychosocial oncologist; Angela Johnson, Dipl OM, MSTOM, program manager. Not pictured: Cheryl A. Sullivan, MS, RD, clinical dietitian; and Sally Kupczyk, RN.



CAROL STEGE AWARD for Environmental Services

Ronald Terrell, specialist, Environmental Services, has been working in the department for 19 years. Currently assigned to the intensive care unit for children on the fifth floor of Kellogg, he is "diligent about making the environment clean and pristine for the children," says Floyd Bailey, supervisor, Environmental Services. Bailey also praises Terrell's conscientiousness and cooperative attitude.



CAROL STEGE MEMORIAL AWARD for Medical Center Engineering

Thomas Novakovich, journeyman mechanic, Medical Center Engineering, has been working on the third shift for four years. Within this time he has been a great asset to the engineering team. His prior 30 years of mechanical experience at Entemann's Bakery prepared him well to perform repairs and maintenance work in the three kitchens at Rush. In addition, he recently has taken on the challenge of the repairs needed in the operating rooms and upgrading and repairing the medical gas outlets in order to minimize the number of calls in this critical area of the hospital. "It has been a pleasure to have him on our team," says Jeffrey Williams, foreman, Medical Center Engineering.

RUSH VALUES AWARD

Kristin Kleiderer, RN, 8 North Atrium, telemetry unit, strives to provide the highest level of patient satisfaction. "She took care of all my needs before I would ask her about them," says one patient, "she is just the best." Kleiderer consistently demonstrates nursing excellence in her daily practices, and she is dedicated to addressing the overall care of the patient, from point of entry to discharge or transfer from her unit. That commitment has translated into volunteering for two significant medical missions. Early this year, she went to Haiti for seven days to provide care to its citizens after the earthquake. More recently, Kleiderer volunteered in Honduras for a week. When asked about her missions, Kleiderer remarked that it is challenging work, "but that is the reason I became a nurse."



Rushing to a bedside isn't uncommon for **Kenneth Nunn**, senior electroencephalography (EEG) technologist, neurology/EEG, who on numerous occasions has administered potentially life-saving first aid to patients having grand mal seizures. Patients frequently praise Nunn for his compassion, care and good nature. "He makes an effort to know them as individuals and has a knack for getting them to open up about their lives, concerns and expectations," says Steve Bild, BS, manager of clinical services, who has worked with Nunn for 18 years. Therefore, it's not surprising that patients frequently ask for Nunn specifically when making future appointments. "Anything he can do to help others, especially our patients, he does not just willingly but with enthusiasm," Bild says.



PATIENT SATISFACTION "STAR"

Every quarter, an employee whose name appears in two or more favorable patient evaluations is awarded the patient satisfaction "star" award. This quarter, five stars were honored: **Vilenscia Hassan**, ultrasound technologist, radiology; **Sarah Horvath, RN**, ambulatory surgery; **Arlinda McDearmon**, patient coordinator, radiology; **Carolyn Palmer, RN**, bone marrow transplant; and **Velma Wilson**, operations manager, university thoracic surgeons. Their patient evaluations included the following comments:

- "Vilenscia was caring and professional. She made an uncomfortable situation better."
- "My nurse in the secondary recovery, Sarah Horvath, was amazing. I was ill, and she was taking care of me with genuine care. She then wheeled me all the way around to the parking garage."
- "Arlinda made the appointment for ultrasound tests, and then noticed that I made a subsequent one. Knowing that there could be a conflict, she called and left a detailed message. Thank you for having such wonderful employees."
- "Carrie was my nurse at discharge. She helped with getting my things to the car. She provided me with all the information I needed about prescriptions, the next doctor appointment, care instructions, etc."
- "Velma Wilson, the office manager, turned over heaven and earth to accommodate us. I am so impressed by her efficiency and good humor. She is always very helpful and pleasant."

(Standing from left) Sarah Horvath, RN, ambulatory surgery; Carolyn Palmer, RN, bone marrow transplant; Vilenscia Hassan, ultrasound technologist, radiology; and (seated) Velma Wilson, operations manager, university thoracic surgeons. Not pictured: Arlinda McDearmon, patient coordinator, radiology.



To nominate someone for a quarterly award, call Clare Quinn at ext. 2-3641.

People News

Kudos

The Arthritis Foundation's greater Chicago chapter named **Gunnar Andersson, MD, PhD**, professor and chairman emeritus, Department of Othopedic Surgery, and The Ronald L. DeWald, MD, Chair in Spinal Deformities at Rush, as the recipient of the 2010 Freedom of Movement Award during its Black Tie Gala on Oct. 16 in Chicago. This award acknowledges leaders in the advancement of research and awareness for the management, prevention and cure of arthritis, the most common cause of disability in the United States.

David Ansell, MD, MPH, chief medical officer; **Raj Behal, MD, MPH**, associate chief medical officer; and **Steven Bines, MD**, general surgery, chairperson, staff quality committee, spoke at the University HealthSystem Consortium's Quality and Safety Fall Forum, held in San Diego, Sept. 29 – Oct. 1. The annual forum brings together the quality and safety leaders in more than 600 academic medical centers for insightful presentations about successful performance improvement initiatives and best practices.

Ansell and Behal presented "Bending the Curve: Improving Quality, Reducing Costs," which described how Rush developed a cohesive plan to respond to health care reform. Bines presented "Focusing Medical Staff and Board Trustees on Quality and Safety," which reviewed which actions were successful and which were not during an 18-month effort Rush undertook to engage medical staff and trustee leaders.

Peter Butler, Rush president and chief operating officer, was recently elected as the chairperson of the board of the University HealthSystem Consortium (UHC). In his two-year term, which begins in January 2011, Butler will help oversee the direction and strategic focus of UHC, which is an alliance of 110 academic medical centers and 254 of their affiliated hospitals representing approximately 90 percent of the country's nonprofit academic medical centers.

The American Political Sciences Association Congressional Policy Fellowship Program has named **XinQi Dong, MD, MPH**, associate professor of medicine, behavioral sciences and nursing, a National Health and Aging Policy Fellow. The goal of the fellowship program is to provide professionals in health and aging with the necessary experience and skills to help shape a healthy and productive future for older Americans. Dong's research focuses on epidemiological studies of elder abuse and neglect both in the United States and China. He is working with policy leaders in both countries to achieve effective change. His fellowship is currently underway and will continue until September 2011. In related news, the Institute on Medicine as a Profession recently honored Dong with its annual Physician Advocacy Merit Award for his commitment to advocating for better safeguards for vulnerable, older adults. This is the first time this award has been given to a geriatrician in the country.

The American Academy of Nursing has awarded a Raise the Voice Edge Runner Award for 2010 to **Carol Farran, DNSc, RN, FAAN**, the Nurses Alumni Association Chairperson in Health and the Aging Process. Farran was named one of three recipients of the award in recognition of an intervention she and her research team developed to improve the mental and physical health of caregivers for family members with Alzheimer's disease. Farran led a clinical trial of the intervention at Rush, and she and her research colleagues are now preparing it for dissemination as a Web-based program. The Raise the Voice award recognizes important research conducted by nurses.

The National Institute of Mental Health, the National Institute on Drug Abuse and the National Institute of Neurological Disorders and Stroke selected **Steven M. Graves**, doctoral student, Department of Pharmacology, for the 2010 Julius Axelrod Travel Award for Society for Neuroscience (SFN). This award was established to honor a scientist with distinguished achievements in the broad field of neuropharmacology or a related area and exemplary efforts in mentoring young scientists. Graves received the award during SFN's annual meeting, which provides the world's largest forum for neuroscientists to debut research and network with colleagues from around the world.

Paul Holinger, MD, MPH, professor of psychiatry, presented the Michael Franz Basch Memorial Award Lecture at the Tomkins Institute's 2010 conference in October. Holinger's speech was titled "Physical Punishment: The Major Unaddressed Public Health Problem of Our Generation." The Tomkins Institute is dedicated to the study of motivation, emotion and cognition. Basch was the Cynthia Oudejans Harris, MD, professor of psychiatry at Rush from 1983 until his death in 1996.

Andres Kanner, MD, professor of neurological sciences and psychiatry at Rush Medical College and a neurologist at Rush, received the J. Kiffin Penry Award for Excellence in Epilepsy Care award from the American Epilepsy Society. This award is given to physicians whose contributions to the epilepsy field were reflective of Penry's philosophy — that of genuine concern for the patient and devotion to the care of persons with epilepsy. Specifically, Kanner was recognized for bringing to light the significant psychiatric effects of epilepsy on patients. Given annually, the Penry award recognizes work that has had a major impact on patient care and improved the quality of life for people with epilepsy.

Stan Lapidos, a member of the Department of Preventive Medicine faculty and project director for the Virtual Integrated Practice Project, gave an invited talk to the faculty of the social work department at Sapir College in Sderot, Israel, on Aug. 9. He spoke on interdisciplinary training and applied practice programs and how to develop them in academic

settings, and he described the various interdisciplinary programs that have been developed successfully at Rush. Lapidos also addressed the importance of forming partnerships with other academic institutions to further initiatives in interdisciplinary education.

Dino Rumoro, DO, chairperson, Department of Emergency Medicine, recently accepted the Illinois National Guard minuteman statue on behalf of Rush for the success of a joint civil-military relationship six years in the making that culminated with the Prairie North Disaster Response Drill held at Rush in June 2010. The statue symbolizes the National Guard Soldier's commitment to answer the nation's call on a moment's notice. Beginning in 2004, Rumoro and his team have worked with the Illinois National Guard to develop what is now a nationally recognized, weeklong Army/Air Force medic training course known as the Advanced Trauma Training Program at Rush.

The March of Dimes honored **Werner Meier, MD**, codirector of the Rush Perinatal Center and Rush Perinatal Network, and **Howard Strassner, MD**, chairperson, Department of Obstetrics and Gynecology, and director of maternal fetal medicine, during its 2010 Jonas Salk Health Leadership Award luncheon in Chicago on Sept. 28. Both physicians were selected for their exemplary leadership in maternal and infant health. Meier received the Lifetime Achievement Award, while Strassner received the Physician Leadership Award.

Jennifer Tornatta, MS, ANP, RN, clinical manager of the Section of Bone Marrow Transplant and Cell Therapy, received the 2010 Nurse of the Year Award from the Leukemia Research Foundation in September. This award, presented annually since 1996, was created to recognize a hematology-oncology nurse who gives time and compassion each and every day to those touched by leukemia, lymphoma and myelodysplastic syndromes. Tornatta received a nursing grant as well as funding for a gift or program for her unit.

In October, the Illinois Department on Aging awarded **Rush's older adult programs** the 2010 Governor's Award for Unique Achievement. Rush was nominated by Jonathan Lavin, president and CEO of AgeOptions, Inc., the Area Agency on Aging of suburban Cook County. AgeOptions is an organization focused on community-based services for older adults. **Robyn Golden, LCSW**, is the director of Rush's older adult programs. She and her team have worked to create a set of programs that support older adults and their caregivers at Rush and in their communities.

The Cystic Fibrosis Center at Rush received the 2010 Care Center Award for Outstanding Partnership at the annual North American Cystic Fibrosis Conference in October in

Baltimore. Rush is one of only three centers that was honored with this important award. The Rush Cystic Fibrosis Center was nominated by the local cystic fibrosis (CF) chapter for the center's efforts during the annual Great Strides campaign promoting research to find a cure for the disease. The network of CF care centers provides expert CF care for people living with the disease. The National Institutes of Health has cited the CF care center network as a model of effective and efficient health care delivery for a chronic disease.

The Foundation for the Accreditation of Cellular Therapy (FACT) has awarded a three-year, full reaccreditation to **The Coleman Foundation Blood and Marrow Transplant Program** for adult autologous and allogeneic transplantation. An autologous transplant is when marrow is taken from a patient's bone before treatment. An allogeneic transplant is bone marrow taken from another person. The blood stem cell collection program and cellular therapy product processing program conducted by the Blood Center of Rush University Medical Center also were reaccredited.

The Coleman Foundation Blood and Marrow Transplant Program is a combined effort of the Section of Bone Marrow Transplant and Cell Therapy and the Rush Blood Center, and it has been accredited continuously by FACT since 2001. Currently, 183 programs in Australia, Canada, the United States and New Zealand are accredited by FACT; Rush is one of only 44 medical centers whose programs have received more than 10 years of accreditation.

Rush Oak Park Hospital's Wound Care Center recently earned two awards: one for high patient satisfaction and outstanding clinical outcomes, and one for healing rates. Eight million Americans suffer from chronic, nonhealing wounds. As that number increases, so will the demand for specialized wound care services. Rush Oak Park Hospital collaborates with Diversified Clinical Services to provide such specialized treatment to the community through the Wound Care Center. The Center of Excellence Award and Robert A. Warriner Center of Distinction Award recognize more than 10 years of high-quality care and exceptional performance by the center's nurses and physicians.

At Rush Oak Park Hospital's center:

- More than 95 percent of patients are satisfied with the care they receive compared with 91.5 percent at about 300 like centers nationwide.
- Patients heal in 37 days compared with 47.4 days nationwide.
- Healing outcomes are 95 percent compared with 79.5 percent nationwide.



David Ansell, MD, MPH



Steven Bines, MD



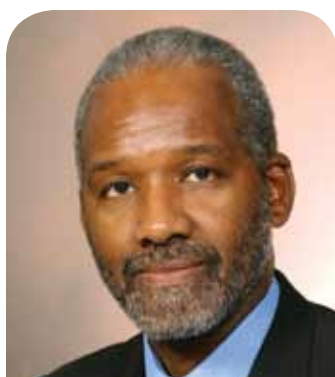
XinQi Dong, MD, MPH



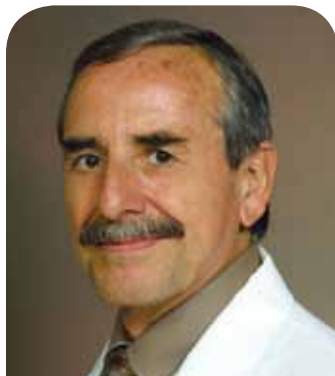
Carol Farran, DNSc, RN, FAAN



Steven Graves



Howard Strassner, MD



Werner Meier, MD

News Briefs

COMMUNITY PROGRAMS

Community programs regarding aging are offered by Rush Generations, a comprehensive program designed to help older adults and family caregivers achieve better health and well-being. For more information, call (800) 757-0202 or visit the Rush Web site, www.rush.edu, and enter “Rush Generations” in the search box. You can also obtain more information by stopping by the Waud Resource Center, which is located in the Johnston R. Bowman Center, Room 438. The following is a list of current offerings.

NEW DEVELOPMENTS IN LUNG CANCER DIAGNOSIS AND TREATMENT

Wednesday, Jan. 12, 6 to 8 p.m.

Armour Academic Center, Room 976

Learn more about early detection of lung cancer and the latest innovations in treatment options from physicians from the Coleman Foundation Comprehensive Lung Cancer Clinic at Rush. This free program will include the following topics and speakers:

- **Early Detection of and Minimally Invasive Surgery for Lung Cancer** – Michael Liptay, MD, thoracic surgeon
- **Chemotherapy, Biotargeted Therapies and Research in Lung Cancer Treatment** – Philip Bonomi, MD, medical oncologist
- **Advances in Radiation Treatment Options** – Krystyna Kiel, MD, radiation oncologist

To register, please call the Rush Physician Referral Service at (888) 352-RUSH (7874) or visit www.rush.edu/events.

BENEFITS CHECKUP

Benefits CheckUp is a simple, free, and fast screening that can help people age 55 and over, and some younger people with Medicare, find and get the benefits for which they are eligible. Please call the Waud Resource Center at (800) 757-0202 for assistance in completing a confidential questionnaire that will lead you to the benefits you may be missing.

QI GONG WORKSHOP

Qi Gong is a form of physical and mental health training that involves either breathing exercises alone or coordinated breath and movement adapted to any ability with the focus on improving overall function. It can be done sitting, standing or moving. This workshop emphasizes working at a comfortable level and not aggravating any previous condition or symptom. There is a registration fee and spots are limited. Please call (800) 757-0202 to register and for time and location.

TAKE CHARGE OF YOUR DIABETES

This free, six-week workshop helps older adults with diabetes regain control of their life to do things that matter most to them with more energy and relief from symptoms related to diabetes. Various times and locations are available. Please call (800) 757-0202 for more information.

RUSH AND THE BULLS TEAM UP

Doctors from Rush took to the court of the United Center on Oct. 15, but they weren’t shooting basketballs. They were coaching local men and women about their health.

The Chicago Bulls teamed up with Rush, the national nonprofit organization Men’s Health Network, Takeda Pharmaceuticals and the federal Office of Minority Health to host the free health screening. Approximately 138 people received screenings and health information about diabetes, heart disease, prostate health, osteoporosis, gout and other chronic diseases. Health care professionals from Rush volunteered to provide counseling and information about the instant results of the screenings.

Striving for better health wasn’t the only incentive for people to stop by the United Center that day. Bulls legends Bob Love and Sidney Green, along with team mascot Benny the Bull, were on hand to greet fans and take part in the screenings. Fans also had the opportunity to view and take photos of the Bulls’ six NBA championship trophies. •



SUMMER AND WINTER, SQUASH A YEAR-ROUND FAVORITE

At Rush, keeping people healthy includes helping Rush staff, employees, students and volunteers lead healthy lifestyles. As part of that effort, Cassie Vanderwall, MS, RD, LD, a registered dietitian at Rush and a certified personal trainer, offers tips on healthy eating and activity in each issue of NewsRounds.

Some foods seem to particularly suit certain seasons of the year. One food that is a winter favorite is squash. The term squash refers to a broad family of two varieties: “summer” and “winter.” Despite their names, both of these vegetable families are available all year long. They can be sweet or savory, making them an ideal candidate for seasonal fare.

Whether you choose summer or winter squash, they are all a great way to add fiber to your diet. In addition, all squash are very good sources of vitamins and minerals, including vitamins A, B and C, potassium, calcium and iron. Their seeds are high in magnesium, zinc and phytosterols. The phytosterols and fiber in the seeds may have cardiovascular benefits, such as lowering cholesterol.

Summer squash are different from winter squash due to their shorter shelf life. They are commonly crossbred, so they can be similar in appearance. Summer varieties are picked when they are immature and the flesh is tender. Most of their nutritional value is in the skin, so it is best to leave these vegetables unpeeled. These squash do not have the versatility of winter squash and are best in savory dishes. Summer squash includes the following types:

- Cousa squash, which is originally from Lebanon and looks like zucchini squash. These squash are great for grilling or filling with whole grains and lean protein, like brown rice and spicy ground turkey breast.
- Pattypan squash resemble a scallop and can be green, white or yellow. They are popular fine dining entrees due to their unique appearance.

- Yellow crockneck squash gets its name because it is longer and thicker towards the end of the vegetable and thinner near the top, making it look as if it has a crooked neck. This type of squash can be roasted and eaten alone, or steamed and pureed into a savory soup.
- Yellow summer squash resembles the crockneck squash but with smooth, edible skin. These squash are commonly prepared just like zucchini (see below).
- Zucchini, which originated in Italy, is very similar in size and texture to yellow summer squash, only its skin is much thinner. These squash are great for roasting, soups or stews.

Winter squash were designated as “winter” vegetables because they will stay fresh at room temperatures for many months. They come in all colors, shapes and sizes and can be used interchangeably in recipes. Most are best roasted until the flesh is tender. Unlike the summer squash, most of the vitamins and minerals of winter squash are in the flesh. The following are some popular types of winter squash:

- Acorn squash are dark green and bright orange with distinct ribs. These squash can be stuffed similarly to the cousa variety, or roasted and finished with cinnamon and nutmeg.

- Banana squash resemble a banana and can grow up to two feet long. Due to their natural sweetness, these squash are commonly sautéed or roasted and seasoned with cinnamon, nutmeg, fruit and fruit juices.
- Butternut squash’s bright orange color lets us know that they are loaded with vitamin A. This type is a common substitute for sweet potatoes in recipes.
- Carnival squash have thick, tough skin with bumps and hearty flesh. This squash has a similar taste and cooking properties as butternut squash, and works very well in soups.
- Delicata, or peanut squash, is of the heirloom variety. They often are baked and pureed into sweet soups.
- Spaghetti squash are bright yellow with stringy flesh that resembles pasta. This squash is a great low-carb substitution for spaghetti.

Clearly, there are plenty of reasons to include squash in your diet all year round. Brighten up your wintertime meals and try one of these varieties. •

For more information or expert nutrition advice, please call (312) 942-DIET (3438) to schedule an appointment with one of Rush’s registered dietitians.



RUSH CELEBRATES ITS SMALLEST PATIENTS

The 36th Annual Rush Children’s Hospital Preemie Picnic was held on Sept. 19, reuniting former patients from the Medical Center’s Neonatal Intensive Care Unit (NICU) with clinical staff. Held in the Rush cafeteria, the picnic celebrated the lives of the many previously critically ill infants who have graduated from the NICU nursery.

Approximately 700 volunteers and NICU family members attended this year’s picnic for an afternoon of games, crafts, photos, live music, prizes and educational materials. Kids enjoyed hotdogs, pumpkin decorating as well as music from a volunteer group from the Old Town School of Folk Music.

Patients and parents alike enjoyed reconnecting with doctors and nurses. Denise Laurich, whose 14-year-old daughter, Lexie, was in the NICU for four months, says her family looks forward to the annual event. “It’s a chance for us to show all the doctors and nurses who helped save Lexie’s life how well she is doing,” she explains.



From left to right, former Rush NICU patient Nova Futrell and Cece Manlapaz, RN, NICU.

“The annual Preemie Picnic at Rush is a celebration of the lives of babies and their families who previously needed intensive, 24-hour comprehensive critical care,” said Debbie Gist, RN, unit director of Women’s and Children’s Nursing at Rush. “These families and babies have overcome major obstacles, and it is amazing to see them continue to thrive and progress.” •